

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000075514

FILED
Apr 14, 2009
Secretary of State

Entity Name: ISLES OF CAPRI MARINA LLC

Current Principal Place of Business:

292 CAPRI BLVD.
NAPLES, FL 34113

New Principal Place of Business:

Current Mailing Address:

128 E 2ND ST
COVINGTON, KY 41011

New Mailing Address:

FEI Number: 20-4457443

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HEMBERGER, MATTHEW B
520 S COLLIER BLVD., #608
MARCO ISLAND, FL 34145 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: CODMAN, CHARLES
Address: 1503 RUBY LAKE POINT, 516
City-St-Zip: NAPLES, FL 34114

Title: MGR () Delete
Name: HEMBERGER, MATTHEW B
Address: 520 S COLLIER BLVD #608
City-St-Zip: MARCO ISLAND, FL 34145

Title: MGR () Delete
Name: HEMBERGER, MARK J
Address: 520 S COLLIER BLVD #608
City-St-Zip: MARCO ISLAND, FL 34145

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: MATTHEW B. HEMBERGER

MGR

04/14/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date