2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Aug 30, 2006
Secretary of State

DOCUMENT# L05000089798

Entity Name: ISLAND GUIDE CHARTERS, LLC

Current Principal Place of Business:

5404 BIRDSONG LANE
BOKEELIA, FL 33922 US

New Principal Place of Business:

13670 ROBERT ROAD
PINELAND, FL 33945 US

Current Mailing Address:

P.O. BOX 91
LABELLE, FL 33975 US

New Mailing Address:

P.O. BOX 256
PINELAND, FL 33945 US

FEI Number: 20-3509243 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

GREEN, CARL A
1805 FORT DENAUD ROAD
LABELLE, FL 33935 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: JONES, JONATHAN M
Address: 5404 BIRDSONG LANE
City-St-Zip: BOKEELIA, FL 33922 US

Title: MGRM ( ) Delete
Name: GREEN, CARL A
Address: 1805 FORT DENAUD ROAD
City-St-Zip: LABELLE, FL 33935 US

ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition
Name: JONES, JONATHAN M
Address: 13670 ROBERT ROAD
City-St-Zip: PINELAND, FL 33945 US

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

I hereby certify that the information supplied with this filing does not qualify for the 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: CARL ALTON GREEN MGRM 08/30/2006

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