

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000091433

Entity Name: STORMS ISLAND, LLC

FILED  
Aug 23, 2006  
Secretary of State

**Current Principal Place of Business:**

21325 COACHMAN AVENUE  
C/O GUY S. EMERICH  
PORT CHARLOTTE, FL 33952

**New Principal Place of Business:**

**Current Mailing Address:**

21325 COACHMAN AVENUE  
C/O GUY S. EMERICH  
PORT CHARLOTTE, FL 33952

**New Mailing Address:**

FEI Number: 20-5424589      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:**

EMERICH, GUY S  
FARR, FARR, EMERICH, HACKETT AND CARR, PA  
99 NESBIT STREET  
PUNTA GORDA, FL 33950 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: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES:**

Title: MGR ( ) Change (X) Addition  
Name: EMERICH, GUY S  
Address: 21325 COACHMAN AVENUE  
City-St-Zip: PORT CHARLOTTE, FL 33952 US

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: GUY S. EMERICH

MGR

08/23/2006

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