

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000014550

Entity Name: LADY'S ISLAND GP, LLC

FILED
Jun 15, 2007
Secretary of State

Current Principal Place of Business:

625 N.W. 16TH AVENUE
MIAMI, FL 33125

New Principal Place of Business:

Current Mailing Address:

625 N.W. 16TH AVENUE
MIAMI, FL 33125

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) 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:

Name and Address of New Registered Agent:

BSPA CORPORATE SERVICES, INC.
350 E. LAS OLAS BLVD.
SUITE 1000
FT. LAUDERDALE, FL 33301 US

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:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGR () Change (X) Addition
Name: ST. ROMAIN, DENNY L
Address: 2511 NE 16TH STREET
City-St-Zip: FT. LAUDERDALE, FL 33304

Title: MGR () Change (X) Addition
Name: LACHAPELLE, ROBERT
Address: 3037 OAKTREE LANDING
City-St-Zip: MARIETTA, GA 30066

Title: MGR () Change (X) Addition
Name: BORDEN, JONATHAN R
Address: 625 NW 16TH AVENUE
City-St-Zip: MIAMI, FL 33125

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: DENNY L. ST. ROMAIN

MGR

06/15/2007

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