

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

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FILED
Mar 27, 2007 8:00 am
Secretary of State

03-12-2007 90482 046 ****50.00

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03072007 Chg-LLC CR2E083 (12/06)

DOCUMENT # L06000017805 1. Entity Name PLANTATION ISLAND PARTNERS, LLC					
Principal Place of Business 2730 US 1 SOUTH, SUITE N ST. AUGUSTINE, FL 32086			Mailing Address 2730 US 1 SOUTH, SUITE N ST. AUGUSTINE, FL 32086		
2. Principal Place of Business - No P.O. Box # 1301 Plantation Island Drive South		3. Mailing Address 1301 Plantation Island Drive South			
Suite, Apt. #, etc. Suite 303A		Suite, Apt. #, etc. Suite 303A			
City & State St. Augustine, FL		City & State St. Augustine, FL			
Zip 32080		Country USA		4. FEI Number 51-0567577	
5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required				Applied For ☐ Not Applicable	
6. Name and Address of Current Registered Agent PACETTI, RONALD N 2730 US 1 SOUTH, SUITE N ST. AUGUSTINE, FL 32086			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ (NOTE: Registered Agent signatures required when re-issuing) DATE _____					
Filing Fee is \$50.00 Due by May 1, 2007		Make check payable to Florida Department of State			
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY- ST- ZIP	MGRM PACETTI, RONALD N 2730 US 1 SOUTH, SUITE N ST. AUGUSTINE, FL 32086 ☐ Delete		TITLE NAME STREET ADDRESS CITY- ST- ZIP	☒ Change ☐ Addition 1301 Plantation Island Drive South, Suite 303A St. Augustine, FL 32080	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	MGRM PACETTI, RANDALL A 2730 US 1 SOUTH, SUITE N ST. AUGUSTINE, FL 32086 ☐ Delete		TITLE NAME STREET ADDRESS CITY- ST- ZIP	☒ Change ☐ Addition 1301 Plantation Island Drive South, Suite 303A St. Augustine, FL 32080	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	MGRM KEMP, T.B. 100 SOUTH PARK BLVD., SUITE 106 ST. AUGUSTINE, FL 32086 ☐ Delete		TITLE NAME STREET ADDRESS CITY- ST- ZIP	☒ Change ☐ Addition 1301 Plantation Island Drive South, Suite 303A St. Augustine, FL 32080	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Change ☐ Addition	
11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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 606, Florida Statutes.					
SIGNATURE: <u>Ronald N. Pacetti</u>			3-7-07		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE					