2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Aug 12, 2008
Secretary of State

DOCUMENT# L06000078420

Entity Name: ISLAND INSPIRATIONS, LLC

Current Principal Place of Business:

153 HERCULES DR
FORT MYERS, FL 33931

New Principal Place of Business:

159 HERCULES DR
FORT MYERS, FL 33931

Current Mailing Address:

153 HERCULES DR
FORT MYERS, FL 33931

New Mailing Address:

159 HERCULES DR
FORT MYERS, FL 33931

FEI Number: 51-0594762 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**
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:

KIM, G. JENNIFER
1717 SW 10TH PLACE
CAPE CORAL, FL 33991 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: MGRM ( ) Delete
Name: KIM, G. JENNIFER
Address: 1717 SW 10TH PLACE
City-St-Zip: CAPE CORAL, FL 33991

Title: MGRM ( ) Delete
Name: COLLIER, SCARLETT L
Address: 153 HERCULES DR
City-St-Zip: FORT MYERS, FL 33931

ADDITIONS/CHANGES:

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

Title: MGRM (X) Change ( ) Addition
Name: COLLIER, SCARLETT L
Address: 159 HERCULES DR
City-St-Zip: FORT MYERS, FL 33931

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: G JENNIFER KIM MGRM 08/12/2008

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