2009 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

FILED
Mar 19, 2009
Secretary of State

DOCUMENT# L08000017656

Entity Name: PLEASURE ISLAND ENTERPRISES, LLC

Current Principal Place of Business:

421 WESTMINSTER RD
FT WALTON BEACH, FL 32547

New Principal Place of Business:

Current Mailing Address:

421 WESTMINSTER RD
FT WALTON BEACH, FL 32547

New Mailing Address:

FEI Number: 26-4109990 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WALTERS, MICHAEL C
421 WESTMINSTER RD
FT WALTON BEACH, FL 32547 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: WALTERS, MICHAEL C
Address: 421 WESTMINSTER RD
City-St-Zip: FT WALTON BEACH, FL 32547

Title: MGRM (X) Delete
Name: WALTERS, LORIA
Address: 421 WESTMINSTER RD
City-St-Zip: FT WALTON BEACH, FL 32547

ADDITIONS/CHANGES:

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

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

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: MICHAEL C WALTERS MGRM 03/19/2009

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