

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000112238

FILED
Apr 20, 2009
Secretary of State

Entity Name: PLANTATION ISLAND INVESTMENTS, LLC

Current Principal Place of Business:

1890 S. 14TH STREET
SUITE 200
FERNANDINA BEACH, FL 32034

New Principal Place of Business:

2801 ST. JOHNS BLUFF RD
SUITE 4
JACKSONVILLE, FL 32246

Current Mailing Address:

PO BOX 17833
JACKSONVILLE, FL 32245

New Mailing Address:

FEI Number: 26-3845561 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCCRANIE, CHRISTOPHER J
1890 S. 14TH STREET
SUITE 200
FERNANDINA BEACH, FL 32034 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: TREVETT, HARRY R
Address: 1890 S. 14TH STREET, SUITE 200
City-St-Zip: FERNANDINA BEACH, FL 32034

Title: MGRM () Delete
Name: CITRANO, JAMES JR.
Address: 1890 S. 14TH STREET, SUITE 200
City-St-Zip: FERNANDINA BEACH, FL 32034

Title: MGRM () Delete
Name: TREVETT, BRETT
Address: 1890 S. 14TH STREET, SUITE 200
City-St-Zip: FERNANDINA BEACH, FL 32034

Title: MGRM () Delete
Name: MCCRANIE, CHRISTOPHER J
Address: 1890 S. 14TH STREET, SUITE 200
City-St-Zip: FERNANDINA BEACH, FL 32034

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: TREVETT, HARRY R
Address: 2801 ST. JOHNS BLUFF STE 4
City-St-Zip: JACKSONVILLE, FL 32246

Title: MGRM (X) Change () Addition
Name: CITRANO, JAMES JR.
Address: 2801 ST. JOHNS BLUFF ROAD STE 4
City-St-Zip: JACKSONVILLE, FL 32246

Title: MGRM (X) Change () Addition
Name: TREVETT, BRETT
Address: 2801 ST. JOHNS BLUFF ROAD STE 4
City-St-Zip: JACKSONVILLE, FL 32246

Title: MGRM (X) Change () Addition
Name: MCCRANIE, CHRISTOPHER J
Address: 2801 ST. JOHNS BLUFF ROAD STE 4
City-St-Zip: JACKSONVILLE, FL 32246

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: HARRY R. TREVETT

MGRM

04/20/2009

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