

# **2011 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

DOCUMENT# L10000002262

**Entity Name:** 746 HARBOUR ISLES LLC

**FILED**  
**Sep 22, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

153 FORESIDE ROAD  
FALMOUTH, ME 04101 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 535  
BUXTON, ME 04903 US

**New Mailing Address:**

PO BOX 535  
BUXTON, ME 04093 US

**FEI Number:** 27-1622918

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CFRA, LLC  
100 S. ASHLEY DR.  
SUITE 400  
TAMPA, FL 33602 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  
Name: GOODRICH, STEPHEN  
Address: PO BOX 535  
City-St-Zip: BUXTON, ME 04039 US

I hereby 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: STEPHEN GOODRICH

MGRM

09/22/2011

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