2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 23, 2006 08:00 AM
Secretary of State

DOCUMENT # M00000001330

1. Entity Name
CARIBBEAN ISLE, LLC

Principal Place of Business	Mailing Address
115 WEST CANON PERDIDO, SUITE 200 SANTA BARBARA, CA 93101	115 WEST CANON PERDIDO, SUITE 200 SANTA BARBARA, CA 93101

DO NOT WRITE IN THIS SPACE

01162006No Chg-LLC CR2E083 (11/05)

4. FEI Number
77-0547224

☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

CORP INCORPORATED
ST 6TH AVE.
HASSEE, FL 32303

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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

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $50.00
Due by May 1, 2006

9. MANAGING MEMBERS/MANAGERS

MGRM
KNELL, JAMES P
115 W CANON PERDIDO, STE 200
SANTA BARBARA, CA 93101

U00000398104
01/30/06-80081-016 50.00

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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 608, Florida Statutes.