**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000166797

**FILED**
**Feb 15, 2019**
**Secretary of State**
**8665286963CC**

**Entity Name:** ISLAND TIME HARBOUR ISLE LLC

**Current Principal Place of Business:**

379 ARUBA CIRCLE
301
BRADENTON, FL 34209

**Current Mailing Address:**

226 5TH AVE N
705
ST. PETERSBURG, FL 33701

**FEI Number: 83-1190969**

**Certificate of Status Desired:** No

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

RYAN, SEAN
226 5TH AVE N
705
ST. PETERSBURG, FL 33701 US

*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

**Authorized Person(s) Detail :**

| | | | |
|---|---|---|---|
| Title | MGR | Title | MGR |
| Name | RYAN, SEAN | Name | JONES, DEBORAH |
| Address | 226 5TH AVE N | Address | 226 5TH AVE N |
| City-State-Zip: | ST. PETERSBURG FL 33701 | City-State-Zip: | ST. PETERSBURG FL 33701 |

I *hereby certify that the information indicated on this report or supplemental 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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

SIGNATURE: SEAN RYAN — MANAGER — 02/15/2019

Electronic Signature of Signing Authorized Person(s) Detail — Date