2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 700042

FILED Mar 03, 2009 Secretary of State

Entity Name: ISLE OF PINES PROPERTY OWNERS' ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

13040 LAKE MARY LANE RD ORLANDO, FL 32832 US

Current Mailing Address: New Mailing Address:

13040 LAKE MARY LANE RD ORLANDO, FL 32832 US

FEI Number: 59-1056274 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

BOYD, JR, FREDERICK E MR
14401 FLO RD

BLAIR, HUGH J MR
14217 NELL DR

ORLANDO, FL 32832 US ORLANDO, FL 32832 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: HUGH J. BLAIR 03/03/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 PD () Delete
 Title:
 PD (X) Change () Addition

 Name:
 WORCESTER, JOHN MR
 Name:
 BOYD, JR, FREDRICK E MR

 Address:
 13325 LAKE MARY JANE RD
 Address:
 13325 LAKE MARY JANE RD

 City-St-Zip:
 ORLANDO, FL 32832 US
 City-St-Zip:
 ORLANDO, FL 32832 US

Title: VP () Delete Title: VP (X) Change () Addition Name: EASTBURN, AL MR Name: AIKIN, DANA MR

Address: 14644 AUGUSTINE RD Address: 14432 CONIFER DR.
City-St-Zip: ORLANDO, FL 32832 US City-St-Zip: ORLANDO, FL 32832 US

Title: SEC () Delete Title: SEC (X) Change () Addition Name: MC ADAMS, ROBIN MS Name: TERRI, SMITH MS

Address: 14418 FLO ROAD Address: 14419 NELL DR
City-St-Zip: ORLANDO, FL 32832 US City-St-Zip: ORLANDO, FL 32832 US

Title: TD () Delete Title: () Change () Addition

 Name:
 BLAIR, HUGH J MR
 Name:

 Address:
 14217 NELL DRIVE
 Address:

 City-St-Zip:
 ORLANDO, FL 32832 US
 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 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 an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: HUGH J.BLAIR TD 03/03/2009