2003 NOT-FOR-PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # 747524

1. Entity Name



Jan 30, 2003 8:00 am Secretary of State
01-30-2003 90173 022 ****61.25

FILED

ISLAND N, INC	CANAL	MOBILE	HOME	IMPRO	VEMENT	ASSOC	l
 							_

Principal Place of Business Mailing Addre 1629 BASS AVENUE 1629 BASS AVE SEVILLE FL 32190 SEVILLE FL 321					BASS AVENUE			T 					
2. Principal F	Place of Busin	ess	3. Ma	3. Mailing Address									
Suite, Apt. #, etc.				Suite, Apt. #, etc.				CHECK HERE IF MAKING CHANGES					
City & State			C	City & State				4. FEI Number 59-0388034				Applied For Not Applicable	
Zip Country			Zi	Zip Country				5. Certificate of Status Desired \$8.75. Additional					
	6. Name	and Address of Current	Register	ed Agent				7. Name and Add	Iress of New Regis				
						Name							
HOLSAPPLE, JAMES 1629 BASS AVENUE SEVILLE FL 32 9 90			,	,		Street Address (P.O. Box Number is Not Acceptable)							
••••						City				FL	Zip Cod		
	tions of registe	submits this statement for ered agent. All Call Call Carry or printed name of registered agent.	112-					ed agent, or both, in	the State of Florida			and accept	
FILE NOW: FEE IS \$61.25 9. Election Campai Trust Fund Contr							\$5.00 May Be Added to Fees	Florida [Departn		State		
10.	185	OFFICERS AND DIF	RECTORS		11.	· -	A	DOITIONS/CHANG	ES TO OFFICERS A	ND DIRE	CTORS IN		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PR JOHNSON 1633 BASS SEVILLE FI	AVE		☐ Delete	1					[Change	☐ Addition }	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KILKENNY, 1602 BREA SEVILLE FI			☐ Delete		i	معاديث مسرد	- · · · · · · · · · · · · · · · · · · ·	-		Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	JORDAN, V	VILLIAM IM DR		□ Delete			-			{	Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WILSON, A 1628 BREA SEVILLE FI	AY M Dr.		Ø Delete			D BOB 14:	7 PAWAO 81 BAGG	WICZ AVE 37190		Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	1STV MULHEROI 1624 BASS SEVILLE FI	N, RALPH S AVENUE		☐ Delete	4						☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-7IP	2NDV	E, JAMES R. B AVE.	<u>-</u>	☐ Delete		1				Γ	Change	☐ Addition	

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE