

2005 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# 766798

FILED
Nov 18, 2005
Secretary of State

Entity Name: ISLAND SANDS CONDOMINIUM ASSOCIATION, INC. OF FORT WALTON BEACH

Current Principal Place of Business:

862 SCALLOP COURT
FORT WALTON, FL 32548

New Principal Place of Business:

Current Mailing Address:

PO BOX 304
HOLT, FL 32564

New Mailing Address:

PO BOX 4453
FT WALTON BEACH, FL 32549

FEI Number: 59-1775514 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

SAUNDERS, GEORGE R
5040 GALLIVER CUTOFF
BAKER, FL 32531 US

Name and Address of New Registered Agent:

RAHE, THEODORE D
202 ANGELFISH
FT WALTON BEACH, FL 32548 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: THEODORE D. RAHE

11/18/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: DELAUNE, ARTHUR
Address: 19438 TICE RD
City-St-Zip: COVINGTON, LA 70436

Title: T () Delete
Name: SAUNDERS, GEORGE
Address: 5040 GALLIVER CUTOFF
City-St-Zip: BAKER, FL 32531

Title: S () Delete
Name: LINDSEY, MIKE
Address: 509 ABBEYWOOD DR.
City-St-Zip: CARY, IL 60013

Title: V () Delete
Name: WEICHT, BUCK
Address: 1768 FONTAINE DR.
City-St-Zip: JONESBORO, GA 30236

Title: D () Delete
Name: SCHOMMER, STEVEN
Address: 209 LAFITTE
City-St-Zip: MANDEVILLE, LA 70448

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: T (X) Change () Addition
Name: LINDSEY, MIKE
Address: 509 ABBEYWOOD DR.
City-St-Zip: CARY, IL 60013

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: A/S () Change (X) Addition
Name: RAHE, THEODORE D
Address: 202 ANGELFISH
City-St-Zip: FT WALTON BEACH, FL 32548

I hereby certify that the information supplied with this filing does not qualify for the 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 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: THEODORE D. RAHE

A/S

11/18/2005

Electronic Signature of Signing Officer or Director

Date