2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N00000000423

RT FILED

May 21, 2008
Secretary of State

Entity Name: ISLAND CLUB WEST HOMEOWNER'S ASSOCIATION, INC.

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

6126 PHEASANT RIDGE DRIVE 14344 MANDOLIN DR FOWLERVILLE, MI 48836 US ORLANDO, FL 48836 US

Current Mailing Address: New Mailing Address:

6126 PHEASANT RIDGE DRIVE 14344 MANDOLIN DR FOWLERVILLE, MI 48836 US ORLANDO, FL 48836 US

FEI Number: 59-3732542 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

SOBER, KYLE
216 ORCHID DR
DAVENPORT, FL 33897
US

WEBB, WILLIAM
14344 MANDOLIN DR
ORLANDO, FL 32837
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: WILLIAM C. WEBB 05/21/2008

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D ()Delete Title: ()Change ()Addition

 Name:
 SOBER, KYLE
 Name:

 Address:
 6126 PHEASANT RIDGE DR.
 Address:

 City-St-Zip:
 FOWLERVILLE, MI 48836 US
 City-St-Zip:

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

Name: BRAA, LUKE Name: BRAA, LUKE

 Address:
 P O BOX 135994
 Address:
 14129 OASIS COVE BLVD

 City-St-Zip:
 CLERMONT, FL 34713 US
 City-St-Zip:
 WINDERMERE, FL 34786 US

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

 Name:
 MARTIN, STEVE
 Name:
 SAYORA, NAEEM

 Address:
 6 HERMITAGE STREET
 Address:
 800 CLIFFS DR, SUITE 108

 City-St-Zip:
 WADING RIVER, NY 11792 US
 City-St-Zip:
 YPSILANTI, MI 48198 US

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: WILLIAM C. WEBB RA 05/21/2008