2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Nov 24, 2008
Secretary of State

DOCUMENT# N00000000423

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

Current Principal Place of Business:

14344 MANDOLIN DR
ORLANDO, FL 48836 US

New Principal Place of Business:

3104 SAND MINE ROAD
DAVENPORT, FL 33897 US

Current Mailing Address:

14344 MANDOLIN DR
ORLANDO, FL 48836 US

New Mailing Address:

3104 SAND MINE ROAD
DAVENPORT, FL 33897 US

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

Name and Address of Current Registered Agent:

WEBB, WILLIAM
14344 MANDOLIN DR
ORLANDO, FL 32837 US

Name and Address of New Registered Agent:

MID-FLORIDA PROPERTY PROFESSIONALS, INC.
3104 SAND MINE ROAD
DAVENPORT, FL 33897 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: DEANA M HAMILL 11/24/2008
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: SOBER, KYLE
Address: 6126 PHEASANT RIDGE DR.
City-St-Zip: FOWLERVILLE, MI 48836 US

Title: VD ( ) Delete
Name: BRAA, LUKE
Address: 14129 OASIS COVE BLVD
City-St-Zip: WINDERMERE, FL 34786 US

Title: STD ( ) Delete
Name: SAYORA, NAEEM
Address: 800 CLIFFS DR, SUITE 108
City-St-Zip: YPSILANTI, MI 48198 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: ( ) Change ( ) Addition
Name:
Address:
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: LUKE BRAA VD 11/24/2008
Electronic Signature of Signing Officer or Director Date