

2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED
Jan 25, 2008
Secretary of State**

DOCUMENT# N01000007307

Entity Name: EMERALD ISLAND RESORT MASTER ASSOCIATION, INC.**Current Principal Place of Business:**5401 KIRKMAN ROAD, SUITE 450
ORLANDO, FL 32819**New Principal Place of Business:**2751 EMERALD ISLAND BLVD
KISSIMMEE, FL 34747**Current Mailing Address:**5401 KIRKMAN ROAD, SUITE 450
ORLANDO, FL 32819**New Mailing Address:**2751 EMERALD ISLAND BLVD
KISSIMMEE, FL 34747

FEI Number: 01-0595456

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:CARPENTER, SUE
5401 KIRKMAN ROAD, SUITE 450
ORLANDO, FL 32819 US**Name and Address of New Registered Agent:**MID-FLORIDA PROPERTY PROFESSIONALS, INC.
2751 EMERALD ISLAND BLVD
KISSIMMEE, FL 34747 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

01/25/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:Title: DP () Delete
Name: LANDSMAN, BRETT
Address: 4 ST LAWRENCE PL
City-St-Zip: JERICO, NY 11753Title: DS () Delete
Name: BARBARA JEAN, FREDERICK
Address: 1601 YORKSHIRE TERRACE
City-St-Zip: LAKELAND, FL 33809Title: DT () Delete
Name: ANDREW, SWEENTHAM
Address: 7 HAYMAN RISE GRANGE FARM
City-St-Zip: MILTON KEYNES, UK MK8 0NDTitle: D (X) Delete
Name: MALCOHM, CHISHOLM
Address: 7 WINGATE TER
City-St-Zip: HOUNTDEL, NJ 08873**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**Title: () Change () Addition
Name:
Address:
City-St-Zip:Title: () Change () Addition
Name:
Address:
City-St-Zip:Title: DT (X) Change () Addition
Name: ANDREW, SWEETENHAM
Address: 7 HAYMAN RISE GRANGE FARM
City-St-Zip: MILTON KEYNES, UK MK8 0NDTitle: () 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: BRETT LANDSMAN

P

01/25/2008

Electronic Signature of Signing Officer or Director

Date