FILED 2002 UNIFORM BUSINESS REPORT (UBR) Jul 22, 2002 8:00 am **DOCUMENT # N01449** Secrétary of State 07-22-2002 90156 027 ****61 25 ISLAND HOME CONDOMINIUM ASSOCIATION, INC. Principal Place of Business Mailing Address DAYAAATA PO=80X=386 PO±BOX±386 ET: WALTON: BEACH: FL=32549 FT.: WALTON: BEACH: FL=32549 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc DO NOT WRITE IN THIS SPACE YOULO! 1.0. BOX City & State 4. FE! Number Applied For 59-2436074 Not Applicable Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent WEHNER 4131 Street Address (P.O. Box Number is Not Acceptable) LUTHER, FRANCIS S 306 CYPRESS ST 288 ELLIS RD. # 112 DEŠTIN FL 32541 Zip Code ろみぶいめ 8. 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. I am familiar with, and accept the obligations of registered agent. 1-16-02 SIGNATURE After September 13, 2002, 9. Election Campaign Financing Make Check Payable to \$5.00 May Be min. will be \$236.25. Trust Fund Contribution. Added to Fees **Department of State** OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. President Addition PD TITI F TITLE Change Gentry Logers KILPATRICK: JOE NAME NAME 485 GULFSHORE DR # 206 STREET ADDRESS 504-GULFSHORE*#17 STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP DESTIN FL 32541 Delete ☐ Change ☐ Addition TITLE NAME CRANE, DEAN NAME STREET ADDRESS STREET ADDRESS 202 ANGEKFISH CITY-ST-ZIP CITY-ST-ZIP FORT WALTON BEACH FL 32548 DIRECTOR Delete LUTHER, FRANCES NAME STREET ADDRESS STREET ADDRESS 306 CYPRESS ST CITY-ST-ZIP CITY-ST-ZIP DESTIN FL 32541 VICE PRESIDENT TITLE ☐ Change TITLE Gelete HALRY GRIM NAME NAME COMPTON AVA STREET ADDRESS STREET ADDRESS PO.BOX 106:GULF:WINDSEGOURT FT. WALTON BCH, PL. 3254 CITY-ST-ZIP CITY-ST-ZIP DESTIN: FL SECRETARY ☐ Delete TITLE Addition DD F FOSTER, TIFFANY NAME NAME

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.

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIF

CITY-ST-ZIP

TITLE

NAME

485 GULFSHORE DR #106

DESTIN FL 32541

KING, BRANDON A

PO BOX 5451

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☐ Delete

SOID

104 GULEWINDS CT.

850-275-7756

Change

☐ Addition

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ISLAND HOME CONDOMINIUM ASSOCIATION P.O. BOX 643 DESTIN, FL 32540-0643

July 17, 2002

Fla. Department of State
Division of Corporations
P.O. Box 1500
Tallahassee, FL 32302-1500

RE: Uniform Business Report

Dear Sirs:

We have just received our 2002 Uniform Business Report and it indicates a 60 day notice to dissolve my corporation due to lack of receipt of said report by the original due date of May 1, 2002.

This is the first notice we have received for this year and we have not been late in the past. Under FAQ in this current report request, it indicates that you will waive the late fee if in fact our corporation never received the original report.

Therefore, we are requesting you waive the late fee and accept our payment in the amount of \$61.25 for the annual filing fee. We have enclosed a check and the completed report.

Thank you for your consideration in this matter.

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Sincerely,

Tiffany Foster Secretary

Encls.