2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01449

FILED Apr 10, 2007 Secretary of State

Entity Name: ISLAND HOME CONDOMINIUM ASSOCIATION, INC.

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

10221 EMERALD COAST PARKWAY WEST SUITE 23

MIRAMAR BEACH, FL 32550

Current Mailing Address: New Mailing Address:

10221 EMERALD COAST PARKWAY WEST SUITE 23 MIRAMAR BEACH, FL 32550

FEI Number: 59-2939289 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:

GELDER, JAY B 10221 EMERALD COAST PARKWAY WEST SUITE 23 MIRAMAR BEACH, FL 32550 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:

Clastrania Ciarachura of Danistana d'Anant

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VPD () Delete Title: PD (X) Change () Addition Name: CRANE, KAREN Name: HOFFERT, RICHARD

Address: 805 HOLBROOK CR Address: 36 OLD FERRY ROAD City-St-Zip: FORT WALTON BEACH, FL 32547 City-St-Zip: SHALIMAR, FL 32579

Title: STD () Delete Title: VPD (X) Change () Addition Name: FOSTER, TIFFANY Name: NORMAN, ALLAN

Address: 104 GULFVIEW CT Address: 1375 LAKE SHORE LANE City-St-Zip: DESTIN, FL 32541 City-St-Zip: AUBURN, AL 36830

Title: PD () Delete Title: STD (X) Change () Addition

 Name:
 KING, BRANDON A
 Name:
 KING, BRANDON A

 Address:
 PO BOX 5451
 Address:
 PO BOX 5451

 City-St-Zip:
 DESTIN, FL 32541
 City-St-Zip:
 DESTIN, FL 32541

I hereby certify that the information supplied with this filing does not qualify for the 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: RICHARD HOFFERT PD 04/10/2007