

2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED
Sep 04, 2009
Secretary of State**

DOCUMENT# N03000003423

Entity Name: ISLAND CROWNE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:1900 N ATLANTIC AVE #104
DAYTONA BEACH, FL 32118**New Principal Place of Business:****Current Mailing Address:**1034 RIDGEWOOD AVE
1
HOLLY HILL, FL 32117**New Mailing Address:**1900 N ATLANTIC AVE #104
DAYTONA BEACH, FL 32118

FEI Number: 74-3120154

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:CONNORS, CHRISTOPHER E
1034 RIDGEWOOD AVE STE1
HOLLY HILL, FL 32117 US**Name and Address of New Registered Agent:**PIPER, JOHN D
28 OAK AVE.
ORMOND BEACH, FL 32174 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: JOHN D. PIPER

09/04/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:Title: P () Delete
Name: FOX, DARREL
Address: 1900 NORTH ATLANTIC AVE 1102
City-St-Zip: DAYTONA BEACH, FL 32118Title: VP () Delete
Name: RAE, TOM
Address: 1900 NORTH ATLANTIC AVE 303
City-St-Zip: DAYTONA BEACH, FL 32118Title: T/S () Delete
Name: SHORE, LARRY
Address: 1900 NORTH ATLANTIC AVE 1004
City-St-Zip: DAYTONA BEACH, FL 32118Title: D () Delete
Name: ROSS, BILL
Address: 4218 ST IVES ST
City-St-Zip: SUGAR LAND, TX 77479Title: D () Delete
Name: STAFFORD, JOHN
Address: 7652 SANDALWOOD WAY
City-St-Zip: SARASOTA, FL 34231**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**Title: () Change () Addition
Name:
Address:
City-St-Zip:Title: VP (X) Change () Addition
Name: EVANS, CLYDE VP
Address: 1900 NORTH ATLANTIC AVE # 101
City-St-Zip: DAYTONA BEACH, FL 32118Title: T/S (X) Change () Addition
Name: JONES, DENNISE
Address: 1900 NORTH ATLANTIC AVE #702
City-St-Zip: DAYTONA BEACH, FL 32118Title: D (X) Change () Addition
Name: THOMPSON, JAMES D
Address: 1900 N. ATLANTIC AVE. # 704
City-St-Zip: DAYTONA BEACH, FL 32118Title: () 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: CLYDE EVANS

VP

09/04/2009

Electronic Signature of Signing Officer or Director

Date