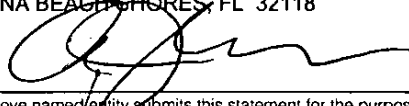
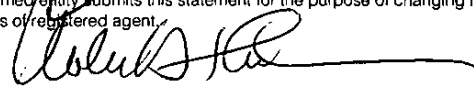
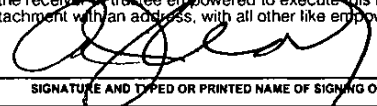


2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT # N05000003144					
1. Entity Name ISLAMORADA CONDOMINIUMS ASSOCIATION OF THE SHORES, INC.					
Principal Place of Business 3280 S ATLANTIC AVE STE A DAYTONA BEACH SHORES, FL 32118			Mailing Address 3280 S ATLANTIC AVE STE A DAYTONA BEACH SHORES, FL 32118		
2. Principal Place of Business - No P.O. Box #			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
Country		Country		4. FEI Number 41-2171804	
5. Certificate of Status Desired ☐				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent KOCH, ALLAN J 3280 S ATLANTIC AVE STE A DAYTONA BEACH SHORES, FL 32118 				7. Name and Address of New Registered Agent Name Robert S. Thurlow Street Address (P.O. Box Number is Not Acceptable) 415 Canal Street City New Smyrna Beach FL Zip Code 32168	
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. SIGNATURE  DATE 9/15/08 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing)					
Amended AR is \$61.25		9. Election Campaign Financing ☐ \$5.00 May Be Added to Fees		Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MACK, JAMES R 781 CRICKLEWOOD TERR HEATHROW, FL 32746	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	600136385506 09/26/08--01043--013 **\$61.25
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MACK, BONNIE 781 CRICKLEWOOD TERR HEATHROW, FL 32746	☒ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KOCH, ALLAN J 1719 N W 92 WAY CORAL SPRINGS, FL 32713	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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.					
SIGNATURE: 				Date 9/24/08 Daytime Phone # 3867601204	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					

FILED

08 SEP 26 AM 11:21

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



09152008 Chg-NP CR2E037 (12/06)

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

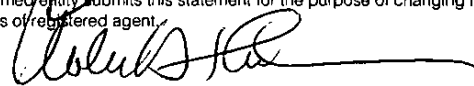
6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

KOCH, ALLAN J
3280 S ATLANTIC AVE STE A
DAYTONA BEACH SHORES, FL 32118

Name **Robert S. Thurlow**
Street Address (P.O. Box Number is Not Acceptable)
415 Canal Street
City **New Smyrna Beach** **FL** Zip Code **32168**

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Make check payable to Florida Department of State

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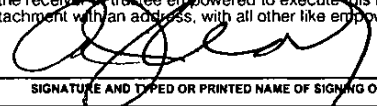
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SIGNATURE: 
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date **9/24/08** Daytime Phone # **3867601204**

9/26/08