

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000000534

FILED
Aug 27, 2008
Secretary of State

Entity Name: ISLEBROOK AT MEADOW WOODS HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

8009 S. ORANGE AVENUE
ORLANDO, FL 32809

New Principal Place of Business:

436 WATERFORD WAY
KISSIMMEE, FL 34746

Current Mailing Address:

8009 S. ORANGE AVENUE
ORLANDO, FL 32809

New Mailing Address:

436 WATERFORD WAY
KISSIMMEE, FL 34746

FEI Number: 59-3616767 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

LELAND MANAGEMENT INC
8009 S. ORANGE AVENUE
ORLANDO, FL 32809 US

Name and Address of New Registered Agent:

EAGLES MANAGEMENT CORP.
436 WATERFORD WAY
KISSIMMEE, FL 32824 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: IRACENA HERNANDEZ

08/27/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: GRIFFITH, PAULETTE
Address: 14035 ABACO ISLE DRIVE
City-St-Zip: ORLANDO, FL 32824

Title: VPD () Delete
Name: GONZALEZ, RAMON
Address: 14024 GASPANILLA DRIVE
City-St-Zip: ORLANDO, FL 32824

Title: T () Delete
Name: FIGUEROA, JOSE
Address: 1914 E. OSCEOLA PKWY
City-St-Zip: KISSIMMEE, FL 34743

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: HERNANDEZ, BARBARA
Address: 14014 SANIBEL ISLE DRIVE
City-St-Zip: ORLANDO, FL 32824

Title: VP (X) Change () Addition
Name: PENA, JUSTO
Address: 1500 ANTIGUA BAY DRIVE
City-St-Zip: ORLANDO, FL 32824

Title: T (X) Change () Addition
Name: ROBLING, DAVID
Address: 14125 ABACO ISLE DRIVE
City-St-Zip: ORLANDO, FL 32824

Title: D () Change (X) Addition
Name: DAY, CHRISTIAN
Address: 1503 ANTIGUA BAY DRIVE
City-St-Zip: ORLANDO, FL 32824

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: IRACENA HERNANDEZ

PM

08/27/2008

Electronic Signature of Signing Officer or Director

Date