

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000057385

Entity Name: FLOATING ISLAND, INC.

FILED
Feb 27, 2009
Secretary of State

Current Principal Place of Business:

FLOATING ISLAND, INC
101 SE 2ND PLACE, #117
GAINESVILLE, FL 32601

New Principal Place of Business:

Current Mailing Address:

FLOATING ISLAND, INC
237 KEY DEER BLVD
BIG PINE KEY, FL 33043

New Mailing Address:

FLOATING ISLAND, INC
101 SE 2ND PLACE, #117
GAINESVILLE, FL 32601

FEI Number: 01-0705632

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BRETT, NANCY L
2921 NE 17TH TERRACE
GAINESVILLE, FL 32609 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BRETT, NANCY L
Address: 2921 NE 17TH TERRACE
City-St-Zip: GAINESVILLE, FL 32609

Title: V () Delete
Name: BRETT, DONALD J
Address: 2921 NE 17TH TERRACE
City-St-Zip: GAINESVILLE, FL 32609

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: NANCY L. BRETT

PRES

02/27/2009

Electronic Signature of Signing Officer or Director

_____ Date