

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000061848

FILED  
Apr 22, 2010  
Secretary of State

**Entity Name:** ISLAND HOSPITALITY MANAGEMENT II, INC.

**Current Principal Place of Business:**

50 COCOANUT ROW  
STE. 200  
PALM BEACH, FL 33480

**New Principal Place of Business:**

**Current Mailing Address:**

50 COCOANUT ROW  
STE. 200  
PALM BEACH, FL 33480

**New Mailing Address:**

**FEI Number:** 26-0250198      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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: MR  
Name: FISHER, JEFFREY H PRES  
Address: 255 CLARKE AV  
City-St-Zip: PALM BEACH, FL 33480

Title: MR  
Name: POLLAK, ROGER A SECTRES  
Address: 3712 CYPRESS LAKE DR  
City-St-Zip: LAKE WORTH, FL 33467

Title: MR  
Name: WALDT, JEFFREY VP  
Address: 4241 WELLINGTON SHORES DR  
City-St-Zip: WELLINGTON, FL 33467

Title: MR  
Name: COHEN, PHILLIP M ASSTSEC  
Address: 1726 ANNANDALE CIRCLE  
City-St-Zip: ROYAL PALM BEACH, FL 33411

Title: MRS  
Name: BACHMAN, BARBARA A VPCONTR  
Address: 4127 CEDAR AV  
City-St-Zip: PALM BEACH GARDENS, FL 33410

I hereby 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 all other like empowered.

SIGNATURE: BARBARA BACHMAN

MRS.

04/22/2010

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date