

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000004011

FILED
Feb 10, 2005
Secretary of State

Entity Name: ISLAND ESTATES HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

ISLAND ESTATES DRIVE
AVENTURA, FL 33160

New Principal Place of Business:

2750 NE MIAMI GARDENS DRIVE
SUITE 300
AVENTURA, FL 33160

Current Mailing Address:

P.O. BOX 601011
NORTH MIAMI BEACH, FL 33160

New Mailing Address:

2750 NE MIAMI GARDENS DRIVE
SUITE 300
AVENTURA, FL 33160

FEI Number: 65-0855725

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCHNEIDER, HARVEY ESQ.
1900 NW CORPORATE BLVD.
SUITE 301 WEST
BOCA RATON, FL 33431 US

Name and Address of New Registered Agent:

SCHNEIDER, HARVEY ESQ.
2750 NE MIAMI GARDENS DRIVE
SUITE 300
AVENTURA, FL 33160 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: HARVEY SCHNEIDER, ESQ.

02/10/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PTDS () Delete
Name: COHEN, GARY
Address: 3901 ISLANDS ESTATES DRIVE
City-St-Zip: AVENTURA, FL 33160

Title: VPD () Delete
Name: COHEN, SUSAN
Address: 3901 ISLAND ESTATES DRIVE
City-St-Zip: AVENTURA, FL 33160

Title: D () Delete
Name: SCHNEIDER, HARVEY
Address: 1900 NW CORPORATE BLVD., SUITE 301 W
City-St-Zip: BOCA RATON, FL 33431

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSD (X) Change () Addition
Name: COHEN, GARY
Address: 2750 NE MIAMI GARDENS DRIVE, STE 300
City-St-Zip: AVENTURA, FL 33160

Title: VPTD (X) Change () Addition
Name: COHEN, SUSAN
Address: 2750 NE MIAMI GARDENS DRIVE, STE 300
City-St-Zip: AVENTURA, FL 33160

Title: D (X) Change () Addition
Name: SCHNEIDER, HARVEY
Address: 2750 NE MIAMI GARDENS DRIVE, STE 300
City-St-Zip: AVENTURA, FL 33160

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: HARVEY SCHNEIDER

D

02/10/2005

Electronic Signature of Signing Officer or Director

Date