2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000006741

Jul 13, 2007 Secretary of State

Entity Name: ISLAND HOUSE NORTH CONDOMINIUM ASSOCIATION INC.

Current Principal Place of Business: New Principal Place of Business:

1140 102ND STREET

BAY HARBOR ISLANDS, FL 33154

Current Mailing Address: New Mailing Address:

1140 102ND STREET

BAY HARBOR ISLANDS, FL 33154

FFI Number: FEI Number Applied For (X) 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: Name and Address of New Registered Agent:

CRUICKSHANK, EDWARD POL, RICARDO J 1140 102ND STREET 1140 102ND STREET

APT 2 APT 1

BAY HARBOR ISLANDS, FL 33154 US BAY HARBOR ISLANDS, FL 33154 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: RICARDO J. POL 07/13/2007

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

PRES () Delete (X) Change () Addition

CRUICKSHANK, EDWARD POL, RICARDO J Name: Name: 1140 102ND STREET # 2 Address: 1140 102ND STREET # 1 Address:

City-St-Zip: BAY HARBOR ISLANDS, FL 33154 City-St-Zip: BAY HARBOR ISLANDS, FL 33154

Title: () Delete Title: () Change () Addition

DAVIS, DELORES Name: Name: Address: 1140 102ND STREET # 4 Address:

City-St-Zip: BAY HARBOR ISLANDS, FL 33154 City-St-Zip:

Title: TREA () Delete Title: TREA (X) Change () Addition

POL, RICARDO WEINBERG, ADAM Name: Name: Address: 1140 102ND STREET # 1 Address: 1140 102ND STREET # 2

City-St-Zip: BAY HARBOR ISLANDS, FL 33154 City-St-Zip: BAY HARBOR ISLANDS, FL 33154

Title: SEC () Delete Title: () Change () Addition

STRICKLEN, ALLAINE Name: Name: Address: 1140 102ND STREET # 3 Address: City-St-Zip: BAY HARBOR ISLANDS, FL 33154 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RICARDO J. POL **PRES** 07/13/2007