

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N01449

**Entity Name:** ISLAND HOME CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**12815 EMERALD COAST PARKWAY  
SUITE 100  
MIRAMAR BEACH, FL 32550**Current Mailing Address:**P.O. BOX 1779  
DESTIN, FL 32540 US**FEI Number:** 59-2939289**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**NEWMAN-DAILEY RESORT PROPERTIES, INC  
12815 EMERALD COAST PARKWAY  
SUITE 100  
MIRAMAR BEACH, FL 32550 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:** KEN WAMPLER

01/15/2015

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

|                 |                           |
|-----------------|---------------------------|
| Title           | VICE PRESIDENT            |
| Name            | DOUCET, LOLA              |
| Address         | 5 APRIL POINT DRIVE SOUTH |
| City-State-Zip: | MONTGOMERY TX 77356       |

|                 |                     |
|-----------------|---------------------|
| Title           | PRESIDENT           |
| Name            | LINTON, RICK        |
| Address         | 1800 WINSTON AVENUE |
| City-State-Zip: | NAVARRE FL 32566    |

|                 |                      |
|-----------------|----------------------|
| Title           | SECRETARY/TREASURER  |
| Name            | KLEIN, TIFFANY       |
| Address         | 104 GULF WINDS COURT |
| City-State-Zip: | DESTIN FL 32541      |

|                 |                    |
|-----------------|--------------------|
| Title           | DIRECTOR           |
| Name            | DIXON, MIKE        |
| Address         | 216 BENJAMIN DRIVE |
| City-State-Zip: | EUFAULA AL 36027   |

|                 |                       |
|-----------------|-----------------------|
| Title           | DIRECTOR              |
| Name            | TAUS, EILEEN          |
| Address         | 15 LEFFINGWELL PLACE  |
| City-State-Zip: | NEW ROCHELLE NY 10801 |

*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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** RICK LINTON

PRESIDENT

01/15/2015

Electronic Signature of Signing Officer/Director Detail

Date