2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 257279

FILED Feb 01, 2012 Secretary of State

Entity Name: THE ISLAND HOUSE APARTMENTS, INC.

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

200 OCEAN LANE DR 200 OCEAN LANE DR MANAGEMENT OFFICE

MANAGEMENT OFFICE KEY BISCAYNE, FL 331491419 US KEY BISCAYNE, FL 331491419

Current Mailing Address: New Mailing Address:

200 OCEAN LANE DR MANAGEMENT OFFICE KEY BISCAYNE, FL 331491461 US

FEI Number: 59-1025684 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

SKRLD, INC 201 ALHAMBRA CIRCLE **SUITE 1102** CORAL GABLES, FL 33134 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: Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title:

OSTROSKI, JOSEPH T MD Name: 200 OCEAN LANE DRIVE #407 Address: City-St-Zip: KEY BISCAYNE, FL 33149 US

Title:

Name: CRAYTHORNE, BRIAN DR

200 OCEAN LANE DRIVE SUITE PB-8 Address:

KEY BISCAYNE, FL 33149 City-St-Zip:

Title:

LARUSSE, LAWRENCE MR Name: 200 OCEAN LANE DRIVE #508 Address: City-St-Zip: KEY BISCAYNE, FL 33149

Title: VΡ

BOWER, ANNE T MS Name: Address: 200 OCEAN LANE DR, #603 City-St-Zip: KEY BISCAYNE, FL 33149

Title:

SHAW, PATRICIA L MRS Name: Address: 200 OCEAN LANE #509 City-St-Zip: KEY BISCAYNE, FL 33149

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.

Ρ SIGNATURE: OSTROSKI, JOSEPH T., MD 02/01/2012