

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 426793

FILED
Apr 29, 2009
Secretary of State

Entity Name: JOHN'S ISLAND REAL ESTATE CO.

Current Principal Place of Business:

1 JOHN'S ISL DR
VERO BEACH, FL 32963

New Principal Place of Business:

Current Mailing Address:

1 JOHN'S ISL DR
VERO BEACH, FL 32963

New Mailing Address:

FEI Number: 59-1512813

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

O'HAIRE, MICHAEL
3111 CARDINAL DR.
VERO BCH, FL 32963 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: DCP () Delete
Name: GIBB, ROBERT M
Address: 199 ISLAND CREEK DR.
City-St-Zip: VERO BEACH, FL 32963

Title: S () Delete
Name: GIBB, WHEATLEY H
Address: 199 ISLAND CREEK DR.
City-St-Zip: VERO BEACH, FL 32963

Title: DV () Delete
Name: GARGARO, JR., EUGENE A
Address: 22 RENAUD ROAD
City-St-Zip: GROSSE POINTE, MI 48236

Title: D () Delete
Name: FINLEY, LYLE
Address: 6045 CENTURY OAKS DRIVE
City-St-Zip: CHATTANOOGA, TN 37416

Title: D () Delete
Name: LYNCH, GERARD P
Address: 80 TORTOISE WAY
City-St-Zip: VERO BEACH, FL 32963

Title: D () Delete
Name: MAHER, JERARD F
Address: 251 FOWLER RD.
City-St-Zip: FAR HILLS, NJ 07931

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROBERT M GIBB

DCP

04/29/2009

Electronic Signature of Signing Officer or Director

Date