2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 10, 2006
Secretary of State

DOCUMENT# 708356

Entity Name: THE ISLAND WATER ASSOC., INC.

Current Principal Place of Business:

3651 SANIBEL-CAPTIVA ROAD
P. O. BOX 509
SANIBEL, FL 33957

New Principal Place of Business:

Current Mailing Address:

3651 SANIBEL-CAPTIVA ROAD
P. O. BOX 509
SANIBEL, FL 33957

New Mailing Address:

FEI Number: 59-1111129 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

BLIND, ROGER A
3651 SANIBEL CAPTIVA RD.
SANIBEL, FL 33957 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

OFFICERS AND DIRECTORS:

Title:	P	( ) Delete
Name:	SCHRODER, ANDREW J	
Address:	1475 ANGEL DRIVE	
City-St-Zip:	SANIBEL, FL 33957	
Title:	VPT	( ) Delete
Name:	DEMAREE, DAVID H	
Address:	781 PENSHELL DRIVE	
City-St-Zip:	SANIBEL, FL 33957	
Title:	VPD	( ) Delete
Name:	FENNIMAN, WILLIAM W	
Address:	15 SEA SCAPE CT	
City-St-Zip:	CAPTIVA, FL 33924	
Title:	VPD	( ) Delete
Name:	GARDNER, TIMOTHY A	
Address:	5415 OSPREY CT	
City-St-Zip:	SANIBEL, FL 33957	
Title:	VPS	( ) Delete
Name:	WIGLEY, ROBERT J	
Address:	800 SEXTANT DR	
City-St-Zip:	SANIBEL, FL 33924	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	P	(X) Change ( ) Addition
Name:	DEMAREE, DAVID H	
Address:	781 PENSHELL DRIVE	
City-St-Zip:	SANIBEL, FL 33957	
Title:	VPT	(X) Change ( ) Addition
Name:	FENNIMAN, WILLIAM W	
Address:	PO BOX 682	
City-St-Zip:	CAPTIVA, FL 33924	
Title:	VPD	(X) Change ( ) Addition
Name:	LINDMAN, ROBERT E	
Address:	1748 JEWEL BOX DRIVE	
City-St-Zip:	SANIBEL, FL 33957	
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 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: WILLIAM ISLER IS M 04/10/2006

Electronic Signature of Signing Officer or Director — Date