

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 711234

FILED
Jan 06, 2010
Secretary of State

Entity Name: ISLAND HOUSE ASSOCIATION INC.

Current Principal Place of Business:

6150 MIDNIGHT PASS ROAD
SARASOTA, FL 34242

New Principal Place of Business:

Current Mailing Address:

6150 MIDNIGHT PASS ROAD
SARASOTA, FL 34242

New Mailing Address:

FEI Number: 59-1160141

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

POCIASK, JIM
6150 MIDNIGHT PASS RD
SARASOTA, FL 34242 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: D
Name: ROBERTS, LAUREL
Address: 105 137TH ST. NE
City-St-Zip: BRADENTON, FL 34202

Title: VP
Name: VOLLENWEIDER, BILL
Address: 26621 EAST RIVER RD
City-St-Zip: GROSSE ILE, MI 48138

Title: D
Name: HOCK, LYNN
Address: 4660 OCEAN BLVD
City-St-Zip: SARASOTA, FL 34242

Title: PD
Name: LEFEVRE, WILLIAM D
Address: 4863 EVANS CT.
City-St-Zip: TRENTON, MI

Title: D
Name: MATHEWS, JAMES
Address: 21120 E. RIVER RD
City-St-Zip: GROSSE ILE, MI 48138

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: WILLIAM LEFEVRE

PD

01/06/2010

Electronic Signature of Signing Officer or Director

Date