

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 711608

**FILED**  
**Apr 29, 2011**  
**Secretary of State**

**Entity Name:** THE ISLAND GROUP, INC.

**Current Principal Place of Business:**

22146 DUPREE DRIVE  
LAND O LAKES, FL 34639

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 263  
LAND O LAKES, FL 346390263

**New Mailing Address:**

**FEI Number:** 23-7161030

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BURNS, TOM TREAS.  
30119 AUGSTINE DR  
WESLEY CHAPEL, FL 33543 US

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

QUIGLEY, ESWARD J  
1523 CANOE DRIVE  
LUTZ, FL 33559 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: EDWARD J QUIGLEY

04/29/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: BISCHOFF, CURT  
Address: 22048 DEPREE DRIVE  
City-St-Zip: LAND O'LAKES, FL 34639 US

Title: VPD  
Name: FORREST, CHERYL  
Address: 22146 DUPREE DRIVE  
City-St-Zip: LAND O'LAKES, FL 34639 US

Title: STD  
Name: QUIGLEY, EDWARD J  
Address: 1523 CANOE DRIVE  
City-St-Zip: LUTZ, FL 33559 US

Title: D  
Name: LEWIS, RON  
Address: 22146 DUPREE DRIVE  
City-St-Zip: LAND O'LAKES, FL 34639 US

Title: D  
Name: MCNEELEY, BURTON  
Address: 22048 DUPREE DRIVE  
City-St-Zip: LAND O LAKES, FL 34639

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: EDWARD J QUIGLEY

S/T

04/29/2011

Electronic Signature of Signing Officer or Director

Date