2006 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT (AR)**

Apr 18, 2006 8:00 am Secretary of State **DOCUMENT # 720014** 1. Entity Name 04-18-2006 90090 025 ****61.25 ISLAND CLUB ONE, INC. Principal Place of Business Mailing Address 777 SOUTH FEDERAL HIGHWAY POMPANO BEACH FL 33062 777 SOUTH FEDERAL HIGHWAY POMPANO BEACH FL 33062 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/05) City & State City & State 4. FEI Number Applied For 59-1378571 Not Applicable Zip Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name ROBERT KAYE & ASSOCIATES P A Street Address (P.O. Box Number is Not Acceptable) 6261 NW 6TH WAY SUITE 103 FT. LAUDERDALE FL 33309 Zip Code 8. The above named entity submitts this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, SIGNATURE (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW: FEE IS \$61.25 9. Election Campaign Financing \$5.00 May Be Make Check Payable to Due By May 1, 2006 Trust Fund Contribution. Added to Fees Florida Department of State OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. Treputo. TITLE ☐ Delete TITLE Change Addition Ref mille BLASE, RALPH NAME NAME 2773. For Ay HID Trypochel 1/33/2 Vice President Schange Addition Joseph Pasterella 32062 777 S FEDERAL HWY H-107 STREET ADDRESS STREET ADDRESS POMPANO BEACH FL 33062 CITY-ST-ZIP CITY-ST-782 Delete TITLE TITLE HARRIS, DONALD NAME NAME STREET ADDRESS 777 \$ FEDERAL HWY STREET ADDRESS 778. Foderal (tem Porypareo Black CITY-ST-ZIP POMPANO BEACH FL 33062 CITY-ST-ZIP ☐ Delete Addition FITLE ALBORRACINI, LOUISE NAME NAME STREET ADDRESS 777 S FEDERAL HWY H-202 STREET ADDRESS CITY-ST-7IP POMPANO BEACH FL 33062 CITY-ST-7/P Delete Mary J. Billis Secretary Schange TITLE TITLE NAME PASTORELLA, JOSEPH NAME STREET ADDRESS 777 S FEDERAL HWY E 203 STREET ADDRESS CITY-ST-ZIP POMPANO BEACH FL 33062 CITY-ST-ZIE TITLE ☐ Delete TITLE ■ Addition PAPA, ELIZABETH A NAME 777 S FEDERAL HWY H 102 STREET ADDRESS STREET ADDRESS POMPANO BEACH FL 33062 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE TITLE ☐ Change ■ Addition COHEN, BARRY NAME NAME 777 S FEDERAL HWY STREET ADDRESS STREET ADDRESS POMPANO BEACH FL 33062 CITY-ST-ZIP

12. Thereby certify that the information supplied with this filling does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information

SIGNATURE:

indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like impowered. 18/06 954 7829695

FILED