## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT# 734165**

FILED Apr 14, 2009 Secretary of State

Entity Name: ISLAND EDUCATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** 1423 JULIA STREET FERNANDINA BEACH, FL 32034 US **Current Mailing Address: New Mailing Address:** PO BOX 3000 FERNANDINA BEACH, FL 32035 US FEI Number: 59-1653881 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CRANE, RENEE 1423 JULIA STREET FERNANDINA BEACH, FL 32034 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change ( ) Addition WAAS, LISA BIAGINI, MICHAEL Name: Name: 223 NORTH 4TH STREET Address: 85044 SAG HARBOR COURT Address: City-St-Zip: FERNANDINA BEACH, FL 32034 City-St-Zip: FERNANDINA BEACH, FL 32034 Title: Title: ( ) Delete () Change () Addition MONAHAN, KATHERINE Name: Name: Address: 4914 RIGGING DRIVE Address: City-St-Zip: FERNANDINA BCH., FL 32034 City-St-Zip: Title: () Delete Title: () Change () Addition SMITH, DONNA Name: Name: 86006 EASTPORT DRIVE Address: Address: City-St-Zip: FERNANDINA BEACH, FL 32034 City-St-Zip: Title: ( ) Delete Title: (X) Change ( ) Addition Name: BIAGINI, MICHAEL Name: HOOD, KARLA 85044 SAG HARBOR COURT 1383 MISSION SAN CARLOS DRIVE Address: Address: City-St-Zip: FERNANDINA BEACH, FL 32034 City-St-Zip: FERNANDINA BEACH, FL 32034 Title: () Delete Title: () Change () Addition CRANE, RENEE Name: Name: 1423 JULIA STREET Address: Address: FERNANDINA BEACH, FL 32034 City-St-Zip: City-St-Zip: Title: () Delete Title: (X) Change ( ) Addition BROUSSARD, PATTY HURLEY, JAMES Name: Name: Address: 96291 NASSAU LAKES CIRCLE Address: 96130 LANCEFORD LANE

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

City-St-Zip:

SIGNATURE: RENEE CRANE M 04/14/2009

FERNANDINA BEACH, FL 32034

City-St-Zip:

FERNANDINA BEACH, FL 32034