2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2009
Secretary of State

DOCUMENT# 741153

Entity Name: ISLAND HOUSE CONDOMINIUM ASSOCIATION, INC

Current Principal Place of Business:

354 CHILIAN AVE.
PALM BEACH, FL 33480

New Principal Place of Business:

Current Mailing Address:

354 CHILIAN AVE.
PALM BEACH, FL 33480

New Mailing Address:

FEI Number: 59-1796632 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BERMAN, DALE
354 CHILEAN AVE, #2-C
PALM BEACH, FL 33480 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:	VPD	( ) Delete
Name:	BREYER, HENRY	
Address:	354 CHILEAN AVE	
City-St-Zip:	PALM BEACH, FL 33480	
Title:	VPD	( ) Delete
Name:	CHAPDELAINE, JEAN LOUIS	
Address:	354 CHILEAN AVE	
City-St-Zip:	PALM BEACH, FL 33480	
Title:	PSD	( ) Delete
Name:	BERMAN, DALE	
Address:	354 CHILEAN AVE, #2-C	
City-St-Zip:	PALM BEACH, FL 33480	
Title:	TD	( ) Delete
Name:	SAFURTLE, ALI	
Address:	354 CHILEAN AVE	
City-St-Zip:	PALM BEACH, FL 33480	
Title:	D	( ) Delete
Name:	LEATHERMAN, RICHARD	
Address:	354 CHILEAN AVE	
City-St-Zip:	PALM BEACH, FL 33480	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
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 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: DALE BERMAN PRES 04/29/2009

Electronic Signature of Signing Officer or Director — Date