

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F96096

FILED  
Jan 04, 2007  
Secretary of State

Entity Name: ISLAND ELEVATOR COMPANY, INC.

## Current Principal Place of Business:

110 PORTO SALVO DR.  
ISLAMORADA, FL 33036

## New Principal Place of Business:

## Current Mailing Address:

110 PORTO SALVO DR.  
ISLAMORADA, FL 33036

## New Mailing Address:

FEI Number: 59-2320064

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

WILLIAMS, MARY  
163 S. COCO PLUM ROAD  
KEY LARGO, FL 33037 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: WILLIAMS, MARY  
Address: 163 S. COCO PLUM ROAD  
City-St-Zip: KEY LARGO, FL 33037

Title: VP ( ) Delete  
Name: WILLIAMS, FRANK T  
Address: 163 S. COCO PLUM ROAD  
City-St-Zip: KEY LARGO, FL 33037

Title: SEC ( ) Delete  
Name: WARGER, JENNIFER  
Address: 10001 S.W. 128TH STREET  
City-St-Zip: MIAMI, FL 33176

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: CEO (X) Change ( ) Addition  
Name: WILLIAMS, FRANK T  
Address: 163 S. COCO PLUM ROAD  
City-St-Zip: KEY LARGO, FL 33037

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARY WILLIAMS

PRES

01/04/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date