2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 19, 2005 8:00 am
Secretary of State
04-19-2005 90378 041 ***158.75

DOCUMENT # G19736

1. Entity Name
ISLAND ONE RESORTS MANAGEMENT CORPORATION

Principal Place of Business	Mailing Address
2345 SANDLAKE ROAD STE 100 ORLANDO, FL 32809	2345 SANDLAKE ROAD STE 100 ORLANDO, FL 32809 US

01042005 Chg-P CR2E034 (10/03)

2. Principal Place of Business	3. Mailing Address
8680 Commodity Circle	8680 Commodity Circle
Suite, Apt. #, etc.	Suite, Apt. #, etc.
Orlando, FL	Orlando, FL
Zip: 32819 Country: USA	Zip: 32819 Country: USA

4. FEI Number: 59-2302506 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☒ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

KORSHAK, STEPHEN D
2345 SAND LAKE ROAD
STE 120
ORLANDO, FL 32809

7. Name and Address of New Registered Agent

Name: Stephen D. Korshak, Esq.
Street Address (P.O. Box Number is Not Acceptable): 8680 Commodity Circle , Suite 101
City: Orlando FL Zip Code: 32819

8. 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. I am familiar with, and accept the obligations of, registered agent.

SIGNATURE: Stephen D. Korshak
(Signature, typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2005 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DC LINDEN, DEBORAH L 2345 SAND LAKE RD STE 100 ORLANDO, FL 32809	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DC Linden, Deborah L 8680 Commodity Circle Orlando, FL 32819	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P STUMBRAS, SULYN 2345 SAND LAKE ROAD, #100 ORLANDO, FL 32809	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P Stumbras, Sulyn 8680 Commodity Circle Orlando, FL 32819	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DS ERFURTH, CARY J 2345 SAND LAKE RD STE 100 ORLANDO, FL 32809	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DS Erfurth, Cary J 8680 Commodity Circle Orlando, FL 32819	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T HOLBROOK, KAREN S 2345 SAND LAKE ROAD, #100 ORLANDO, FL 32809	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T Holbrook, Karen S 8680 Commodity Circle Orlando, FL 32819	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information 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 607, 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 empowered.

SIGNATURE: 4/14/05 407-859-8900
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #