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Apr 28 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # G91392 (2)

1. Corporation Name  
ISLAND INVESTMENTS OF ORLANDO, INC.

Principal Place of Business  
214 S. DILLARD ST.  
WINTER GARDEN FL 34787  
US

Mailing Address  
214 S. DILLARD ST.  
WINTER GARDEN FL 34787-3523  
US

3. Date Incorporated or Qualified  
03/15/1984

3a. Date of Last Report  
05/01/1996

2. Principal Place of Business  
21 91 Broad St  
Suite, Apt. #, etc.

2a. Mailing Address  
26 91 Broad St.  
Suite, Apt. #, etc.

4. FEI Number  
59-2378938

Applied For  
Not Applicable

22 N/A  
City & State  
23 Winter Garden, FL

27 N/A  
City & State  
28 Winter Garden, FL

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Election Campaign Financing  
Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

24 34787  
Country  
25 US

29 34787  
Country  
30 US

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

HARTSFIELD, WILLIAM N  
214 SO DILLARD ST  
WINTER GARDEN FL 34787

81 Name  
82 Street Address (P.O. Box Number is Not Acceptable)  
91 Broad St.  
83  
84 City Winter Garden FL 85 Zip Code 34787

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

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

12. OFFICERS AND DIRECTORS  
TITLE D  
NAME MAJID, ZANIPHA  
STREET ADDRESS 214 S. DILLARD ST.  
CITY-ST-ZIP WINTER GARDEN FL  
TITLE V  
NAME HARTSFIELD, WILLIAM N.  
STREET ADDRESS 214 S. DILLARD ST.  
CITY-ST-ZIP WINTER GARDEN FL  
TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  
1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS 91 Broad St.  
1.4 CITY-ST-ZIP  
2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS 91 Broad St.  
2.4 CITY-ST-ZIP  
3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP  
4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP  
5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP  
6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: [Signature] VP. 4/22/97 654-1300  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/96)