

# **2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# J15699

Entity Name: ISLE OF ST. JOHNS, INC.

**FILED**  
**Jun 17, 2006**  
**Secretary of State**

## **Current Principal Place of Business:**

8854 B SW 129 TERRACE  
MIAMI, FL 33176 US

## **New Principal Place of Business:**

3602 EAST COUNTRY SIDE DRIVE  
INVERNESS, FL 34452 US

## **Current Mailing Address:**

14631 SW 87 PLACE  
PALMETTO BAY, FL 33176 US

## **New Mailing Address:**

3602 EAST COUNTRY SIDE DRIVE  
INVERNESS, FL 34452 US

FEI Number: 59-2674118

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## **Name and Address of Current Registered Agent:**

KOGER, ROBERT A PRES  
14631 SW 87 PLACE  
PALMETTO BAY, FL 33176 US

## **Name and Address of New Registered Agent:**

SLEIGHTER, JAMES M PRES  
3602 EAST COUNTRY SIDE DRIVE  
INVERNESS, FL 34452 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: JAMES M SLEIGHTER

06/17/2006

Electronic Signature of Registered Agent

Date

## **OFFICERS AND DIRECTORS:**

Title: DP ( ) Delete  
Name: KOGER, ROBERT A PRES  
Address: 14631 SW 87 PLACE  
City-St-Zip: PALMETTO BAY, FL 33176 US

Title: VP ( ) Delete  
Name: SLEIGHTER, JAMES M VP  
Address: 3602 EAST COUNTRY SIDE DRIVE  
City-St-Zip: INVERNESS, FL 34452 US

Title: SEC ( ) Delete  
Name: KOGER, ROBERT A SEC  
Address: 14631 SW 87 PLACE  
City-St-Zip: PALMETTO BAY, FL 33176 US

## **ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: DP (X) Change ( ) Addition  
Name: SLEIGHTER, JAMES M PRES  
Address: 3602 EAST COUNTRY SIDE DRIVE  
City-St-Zip: INVERNESS, FL 34452 US

Title: VP (X) Change ( ) Addition  
Name: KOGER, ROBERT A VP  
Address: 14631 SW 87 PLACE  
City-St-Zip: PALMETTO BAY, FL 33176 US

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: JAMES M SLEIGHTER

PRES

06/17/2006

Electronic Signature of Signing Officer or Director

Date