2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 06, 2009
Secretary of State

DOCUMENT# N00000004035

Entity Name: VICTORIA ISLES COMMUNITY ASSOCIATION, INC.

Current Principal Place of Business:

INTEGRITY PROPERTY MGMNT
953 UNIVERSITY DR.
CORAL SPRINGS, FL 33071

New Principal Place of Business:

Current Mailing Address:

INTEGRITY PROPERTY MGMNT
953 UNIVERSITY DR.
CORAL SPRINGS, FL 33071

New Mailing Address:

FEI Number: 90-0071991 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

WHITTLE, CYNTHIA
INTEGRITY PROPERTY MGMNT
953 UNIVERSITY DR.
CORAL SPRINGS, FL 33071 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: VD ( ) Delete
Name: ROLLO, JOE
Address: 5768 NW 48 AVE
City-St-Zip: COCONUT CREEK, FL 33073

Title: PD ( ) Delete
Name: RODNEY, PAUL
Address: 4823 NW 59 CT
City-St-Zip: COCONUT CREEK, FL 33073

Title: STD ( ) Delete
Name: BEN, DOUMA
Address: 5753 NW 48TH AVE
City-St-Zip: COCONUT CREEK, FL 33073

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: STD (X) Change ( ) Addition
Name: MONINGTON, SUZANNE
Address: 5912 NW 47TH TERRACE
City-St-Zip: COCONUT CREEK, FL 33073

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

Title: VD (X) Change ( ) Addition
Name: BEN, DOUMA
Address: 5753 NW 48TH AVE
City-St-Zip: COCONUT CREEK, FL 33073

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: PAUL RODNEY PD 05/06/2009

Electronic Signature of Signing Officer or Director — Date