2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000002942

Entity Name: ISLAND SANDS I.R.B.C.A., INC.

FILED Apr 29, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

504 GULF BOULEVARD INDIAN ROCKS BEACH, FL 33785

Current Mailing Address: New Mailing Address:

19534 GULF BLVD #202 INDIAN SHORES, FL 337853202

FEI Number: 02-0589890 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SMITH, WILLIAM F 19534 GULF BLVD 202

INDIAN SHORES, FL 33785 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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VD () Delete Title: PD (X) Change () Addition Name: BAKER, VICKI L Name: BAKER, VICKI L

Address: 144 THE WOODLANDS
City-St-Zip: KANSAS CITY, MO 64119

Name: BAKER, WCN E
Address: 144 THE WOODLANDS
City-St-Zip: KANSAS CITY, MO 64119

Title: STD () Delete Title: VD (X) Change () Addition

 Name:
 DRAKE, CHERYL L
 Name:
 MERLINO, CHERYL

 Address:
 13802 E 93RD COURT N.
 Address:
 631 MANORWOOD LANE

 City-St-Zip:
 OWASSO, OK 74055
 City-St-Zip:
 LOUISVILLE, CO 80027

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: WILLIAM F. SMITH RA 04/29/2008