

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000008388

FILED
Apr 07, 2008
Secretary of State

Entity Name: ISLESWORTH OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

463499 SR 200
YULEE, FL 32097

New Principal Place of Business:

Current Mailing Address:

P O BOX 1987
YULEE, FL 320411987 US

New Mailing Address:

FEI Number: 59-3762092

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PROPERTY MANAGEMENT SYSTEMS, INC.
463499 SR 200
YULEE, FL 32097 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: PD () Delete
Name: GERHARDT, GLENN
Address: 96032 CARIBBEAN COURT
City-St-Zip: FERNANDINA BEACH, FL 32034 US

Title: VPD () Delete
Name: HOLMES, TED
Address: 96203 MONTEGO BAY
City-St-Zip: FERNANDINA BEACH, FL 32034 US

Title: SD () Delete
Name: TIMMONS, CHRIS
Address: 96044 CARIBBEAN COURT
City-St-Zip: FERNANDINA BEACH, FL 32034 US

Title: TD () Delete
Name: SMITH, JAN
Address: 96084 MONTEGO BAY
City-St-Zip: FERNANDINA BEACH, FL 32034 US

Title: D () Delete
Name: SENG, LINDA
Address: 96065 CARIBBEAN CT
City-St-Zip: FERNANDINA BEACH, FL 32034 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: BELINSKI, JULIA
Address: 96044 JAMAICAN COURT
City-St-Zip: FERNANDINA BEACH, FL 32034 US

Title: VPD (X) Change () Addition
Name: HOLMES, THEODORE
Address: 96203 MONTEGO BAY
City-St-Zip: FERNANDINA BEACH, FL 32034 US

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

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

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

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: TERRELL J POWELL

RA

04/07/2008

Electronic Signature of Signing Officer or Director

Date