## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N03000003423

FILED Feb 18, 2009 Secretary of State

Entity Name: ISLAND CROWNE CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** 1900 N ATLANTIC AVE #104 DAYTONA BEACH, FL 32118 **Current Mailing Address: New Mailing Address:** 1034 RIDGEWOOD AVE HOLLY HILL, FL 32117 FEI Number: 74-3120154 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: CONNORS, CHRISTOPHER E 1034 RIDGÉWOOD AVE STE1 HOLLY HILL, FL 32117 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: () Delete (X) Change ( ) Addition HENSON, SCOTT FOX, DARREL Name: Name: 1 SLEIMAN PKWY, STE, 100 Address: 1900 NORTH ATLANTIC AVE 1102 Address: City-St-Zip: JACKSONVILLE, FL 32216 City-St-Zip: DAYTONA BEACH, FL 32118 Title: Title: ( ) Delete (X) Change ( ) Addition WHITE, ROBERT K Name: RAE, TOM Name: Address: 1 SLEIMAN PKWY SUITE 270 Address: 1900 NORTH ATLANTIC AVE 303 City-St-Zip: JACKSONVILLE, FL 32520 City-St-Zip: DAYTONA BEACH, FL 32118 Title: () Delete Title: T/S (X) Change ( ) Addition FOX, DARRELL SHORE, LARRY Name: Name: 1900 N. ATLANTIC AVE. #1102 1900 NORTH ATLANTIC AVE 1004 Address: Address: City-St-Zip: DAYTONA BEACH, FL 32118 City-St-Zip: DAYTONA BEACH, FL 32118 ( ) Change (X) Addition Title: () Delete Title: D Name: Name: ROSS, BILL Address: Address: 4218 ST IVES ST City-St-Zip: City-St-Zip: SUGAR LAND, TX 77479 Title: () Delete Title: ( ) Change (X) Addition STAFFORD, JOHN Name: Name: 7652 SANDALWOOD WAY Address: Address: City-St-Zip: City-St-Zip: SARASOTA, FL 34231

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: CHRISTOPHER E. CONNORS CAM 02/18/2009