2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000008305

FILED Jan 22, 2009 Secretary of State

Entity Name: ISLES OF SARASOTA HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:		New Principal Place	New Principal Place of Business:	
	EVENTO DR A, FL 34238	US		
urrent M	ailing Addres	ss:	New Mailing Address	s:
	EVENTO DR A, FL 34238	US		
El Number:	51-0526153	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()
ame and	Address of C	Current Registered Agent:	Name and Address of	of New Registered Agent:
DIGSRV	04051			
01 BENÉ	CASEY EVENTO DR. A, FL 34238	US		
901 BENE ARASOT he above	EVENTO DR. A, FL 34238		ourpose of changing its registere	d office or registered agent, or both,
901 BENE ARASOT ne above the State	EVENTO DR. A, FL 34238 named entity : of Florida.		ourpose of changing its registere	d office or registered agent, or both,
901 BENE ARASOT ne above the State	EVENTO DR. A, FL 34238 named entity: of Florida. RE:			d office or registered agent, or both, Date
901 BENE ARASOT he above the State	EVENTO DR. A, FL 34238 named entity: of Florida. RE:	submits this statement for the particles of Registered Agr	ent	
001 BENE ARASOT ne above the State GNATUF	named entity: e of Florida. RE: Electror B AND DIREC BROOKS, SCO	submits this statement for the particle Signature of Registered Aga TORS: Delete OTT PARK COMMONS BLVD	ent	Date
ne above the State GNATUF FFICERS le: me: dress:	e of Florida. RE: BROOKS, SCC 9240 ESTERO, FL 3 V MCCORMICK,	submits this statement for the partic Signature of Registered Age TORS: Delete TT PARK COMMONS BLVD 3928 Delete RICHARD PARK COMMONS BLVD	ent ADDITIONS/CHANGI Title: Name: Address:	Date ES TO OFFICERS AND DIRECTOR

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: SCOTT BROOKS P 01/22/2009