2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 17, 2007
Secretary of State

DOCUMENT# N05000001714

Entity Name: ISLAND VIEWS CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

7005-7007 HOLMES BLVD
HOLMES BEACH, FL 34217

New Principal Place of Business:

Current Mailing Address:

7007 HOLMES BLVD
HOLMES BEACH, FL 34217

New Mailing Address:

FEI Number: 20-4549578 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SHUTTLEWORTH, LAURIE O
7007 HOLMES BLVD
HOLMES BCH, FL 34217 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: SHUTTLEWORTH, LAURIE O
Address: 503 67 ST
City-St-Zip: HOLMES BCH, FL 34217

Title: STD ( ) Delete
Name: SHUTTLEWORTH, WILLIAM
Address: 503 67 ST
City-St-Zip: HOLMES BCH, FL 34217

Title: VD ( ) Delete
Name: SHUTTLEWORTH, TODD W
Address: 649 LOOP RD
City-St-Zip: WESTVIELD, VT 05874

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: SHUTTLEWORTH, LAURIE O
Address: 7007 HOLMES BLVD.
City-St-Zip: HOLMES BCH, FL 34217

Title: STD (X) Change ( ) Addition
Name: SHUTTLEWORTH, WILLIAM
Address: 7007 HOLMES BLVD.
City-St-Zip: HOLMES BCH, FL 34217

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

I hereby certify that the information supplied with this filing does not qualify for the 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: LAURIE O. SHUTTLEWORTH PD 04/17/2007

Electronic Signature of Signing Officer or Director — Date