# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Jul 08, 2008**
**Secretary of State**

DOCUMENT# N05000006628

**Entity Name:** ISLAMORADA COMMUNITY ENTERTAINMENT, INC.

**Current Principal Place of Business:**

88765 OVERSEAS HWY
PLANTATION KEY, FL 33070

**New Principal Place of Business:**

111 INDIAN MOUND TRAIL
ISLAMORADA, FL 33070 US

**Current Mailing Address:**

PO BOX 562
ISLAMORADA, FL 33036

**New Mailing Address:**

PO BOX 1576
ISLAMORADA, FL 33070 US

**FEI Number: 59-3814758** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**
**In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.**

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

MIKLAS, JOE
88765 OVERSEAS HWY
TAVERNIER, FL 33070 US

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

BONHAM, GENE S
1999 UNIVERSITY DRIVE, SUITE 212
CORAL SPRINGS, FL 33071 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: GENE S. BONHAM 07/08/2008
Electronic Signature of Registered Agent Date

**OFFICERS AND DIRECTORS:**

Title: D (X) Delete
Name: MIKLAS, JOE
Address: PO BOX 366
City-St-Zip: ISLAMORADA, FL 33036

Title: D ( ) Delete
Name: FEDER, DAVE
Address: PO BOX 1576
City-St-Zip: TAVERNIER, FL 33070

Title: D (X) Delete
Name: LEVY, RON
Address: PO BOX 305
City-St-Zip: ISLAMORADA, FL 33036

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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: DAVE FEDER D 07/08/2008
Electronic Signature of Signing Officer or Director Date