

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000010266

FILED
Jan 15, 2009
Secretary of State

Entity Name: ISLAND ONE FOUNDATION, INC.

Current Principal Place of Business:

8680 COMMODITY CIR.
ORLANDO, FL 32819

New Principal Place of Business:

Current Mailing Address:

8680 COMMODITY CIR.
ORLANDO, FL 32819

New Mailing Address:

FEI Number: 41-2185460

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

KORSHAK, STEPHEN D
8680 COMMODITY CIR.
ORLANDO, FL 32819 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: D () Delete
Name: LINDEN, DEBROAH L
Address: 8680 COMMODITY CIR.
City-St-Zip: ORLANDO, FL 32819

Title: CD () Delete
Name: ERFURTH, CARY J
Address: 8680 COMMODITY CIR.
City-St-Zip: ORLANDO, FL 32819

Title: SD () Delete
Name: GRUBER, KURT P
Address: 8680 COMMODITY CIR.
City-St-Zip: ORLANDO, FL 32819

Title: PD () Delete
Name: GOULD, PAM
Address: 8680 COMMODITY CIR
City-St-Zip: ORLANDO, FL 32819

Title: TD () Delete
Name: GOULD, PAMELA
Address: 8680 COMMODITY CIRCLE
City-St-Zip: ORLANDO, FL 32819

Title: D () Delete
Name: CAMPBELL, KEN
Address: 8680 COMMODITY CIRCLE
City-St-Zip: ORLANDO, FL 32819

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: C (X) Change () Addition
Name: LINDEN, DEBROAH L
Address: 8680 COMMODITY CIR.
City-St-Zip: ORLANDO, FL 32819

Title: VC (X) Change () Addition
Name: ERFURTH, CARY J
Address: 8680 COMMODITY CIR.
City-St-Zip: ORLANDO, FL 32819

Title: D (X) Change () Addition
Name: HOLBROOK, KAREN S
Address: 8680 COMMODITY CIRCLE
City-St-Zip: ORLANDO, FL 32819

Title: P (X) Change () Addition
Name: GOULD, PAMELA
Address: 8680 COMMODITY CIR
City-St-Zip: ORLANDO, FL 32819

Title: T (X) Change () Addition
Name: STUMBRAS, SULYN
Address: 8680 COMMODITY CIRCLE
City-St-Zip: ORLANDO, FL 32819

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: DEBORAH L. LINDEN

C

01/15/2009

Electronic Signature of Signing Officer or Director

Date