2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2007
Secretary of State

DOCUMENT# N06000004156

Entity Name: ISLA BELLA ISLE, INC.

Current Principal Place of Business:

500 SEMORAN BLVD., STE. 2092
CASSELBERRY, FL 327075343

New Principal Place of Business:

500 SEMORAN BLVD., STE. 2064
CASSELBERRY, FL 327075343

Current Mailing Address:

P.O. BOX 2369
MINNEOLA, FL 34755

New Mailing Address:

FEI Number: 20-4604673 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
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:

HILLEBRANDT, JOSEPH M.
500 SEMORAN BLVD., STE. 2092
CASSELBERRY, FL 327075343 US

Name and Address of New Registered Agent:

HILLEBRANDT, JOSEPH M.
500 SEMORAN BLVD., STE. 2064
CASSELBERRY, FL 327075343 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: JOSEPH M HILLEBRANDT 05/01/2007
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: FRISZ, JEFF
Address: 500 SEMORAN BLVD., STE. 2092
City-St-Zip: CASSELBERRY, FL 327075343

Title: D ( ) Delete
Name: GRAYFORD, GUY
Address: P.O. BOX 1709
City-St-Zip: MINNEOLA, FL 34755

Title: D (X) Delete
Name: GRAYFORD, JAMES R.
Address: P.O. BOX 1822
City-St-Zip: MINNEOLA, FL 34755

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: FRISZ, JEFF
Address: 500 SEMORAN BLVD., STE. 2064
City-St-Zip: CASSELBERRY, FL 327075343

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: JEFF FRISZ D 05/01/2007
Electronic Signature of Signing Officer or Director — Date