

2011 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Apr 12, 2011
Secretary of State

DOCUMENT# N07000000404

Entity Name: THE ISLES AT CAY COMMONS CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**5401 KIRKMAN RD, STE 318
ORLANDO, FL 32819**New Principal Place of Business:**4902 EISENHOWER BLVD
SUITE 216
TAMPA, FL 33634**Current Mailing Address:**5401 KIRKMAN RD, STE 318
ORLANDO, FL 32819**New Mailing Address:**P.O. BOX 803555
DALLAS, TX 75380**FEI Number:** 38-3749739**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**REALMANAGE LLC
5401 KIRKMAN RD, STE 318
ORLANDO, FL 32819 US**Name and Address of New Registered Agent:**REALMANAGE LLC
4902 EISENHOWER BLVD
SUITE 216
TAMPA, FL 33634 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: _____

Electronic Signature of Registered Agent

04/12/2011

Date

OFFICERS AND DIRECTORS:

Title: PD
Name: MOHAMMAD, IDREES
Address: 5401 KIRKMAN RD, STE 318
City-St-Zip: ORLANDO, FL 32819

Title: VD
Name: ZWEIFEL, JAMIE
Address: 5401 KIRKMAN RD, STE 318
City-St-Zip: ORLANDO, FL 32819

Title: TD
Name: HUGHES, CAROLYNN
Address: 5401 KIRKMAN RD, STE 318
City-St-Zip: ORLANDO, FL 32819

I hereby 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 all other like empowered.

SIGNATURE: CYNTHIA MONTSINGER

LCAM

04/12/2011

Electronic Signature of Signing Officer or Director

Date