2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 24, 2009
Secretary of State

DOCUMENT# N07000008937

Entity Name: THE ISLAND NATION OF BROWARD, INC.

Current Principal Place of Business:

1001 SE 9TH AVENUE
FORT LAUDERDALE, FL 33316

New Principal Place of Business:

Current Mailing Address:

1001 SE 9TH AVENUE
FORT LAUDERDALE, FL 33316

New Mailing Address:

FEI Number: 26-1123641 **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:

COON, THOMAS T ESQ
888 D. ANDREWS AVE, SUITE 204
FORT LAUDERDALE, FL 33316 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: KOZICH, ROBERT J JR
Address: 1001 SE 9TH AVENUE
City-St-Zip: FORT LAUDERDALE, FL 33316

Title: D ( ) Delete
Name: COON, THOMAS T JR
Address: 888 S. ANDREWS AVENUE, SUITE 204
City-St-Zip: FORT LAUDERDALE, FL 33316

Title: D ( ) Delete
Name: DOLPH, RYAN
Address: 4201 NE 26TH AVENUE
City-St-Zip: FORT LAUDERDALE, FL 33316

Title: D ( ) Delete
Name: LIMPERIS, JOHN
Address: 1124 BAYVIEW DRIVE
City-St-Zip: FORT LAUDERDALE, FL 33304

Title: D ( ) Delete
Name: BINDER, JONATHAN
Address: 625 POINCIANA DRIVE
City-St-Zip: FORT LAUDERDALE, FL 33301

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:

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: ROBERT J. KOZICH JR. D 06/24/2009

Electronic Signature of Signing Officer or Director — Date