

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000004769

FILED  
Apr 20, 2009  
Secretary of State

**Entity Name:** ISLANDER VILLAGE MASTER PROPERTY OWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

201 FRONT ST., #224  
KEY WEST, FL 33040

**New Principal Place of Business:**

201 FRONT STREET  
SUITE 224  
KEY WEST, FL 33040 US

**Current Mailing Address:**

201 FRONT ST., #224  
KEY WEST, FL 33040

**New Mailing Address:**

201 FRONT STREET  
SUITE 224  
KEY WEST, FL 33040 US

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired ( )**

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

SWIFT, EDWIN O III  
201 FRONT ST., #224  
KEY WEST, FL 33040 US

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

SWIFT, EDWIN O III  
201 FRONT STREET  
SUITE 224  
KEY WEST, FL 33040 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:

04/20/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: SWIFT, EDWIN O III  
Address: 201 FRONT ST., #224  
City-St-Zip: KEY WEST, FL 33040

Title: VSD ( ) Delete  
Name: BELAND, CHRISTOPHER  
Address: 201 FRONT ST., #224  
City-St-Zip: KEY WEST, FL 33040

Title: T ( ) Delete  
Name: MOSHER, MOE  
Address: 201 FRONT ST., #224  
City-St-Zip: KEY WEST, FL 33040

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

Title: PD (X) Change ( ) Addition  
Name: SWIFT, EDWIN O III  
Address: 201 FRONT ST., #224  
City-St-Zip: KEY WEST, FL 33040 US

Title: VSD (X) Change ( ) Addition  
Name: BELAND, CHRISTOPHER  
Address: 201 FRONT ST., #224  
City-St-Zip: KEY WEST, FL 33040 US

Title: T (X) Change ( ) Addition  
Name: MOSHER, MOE  
Address: 201 FRONT ST., #224  
City-St-Zip: KEY WEST, FL 33040 US

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: EDWIN O. SWIFT, III

P

04/20/2009

Electronic Signature of Signing Officer or Director

Date