

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10000005748

FILED  
Apr 29, 2012  
Secretary of State

**Entity Name:** ISLAND LIFE SOCIAL CLUB, INC.

**Current Principal Place of Business:**

9294 VANDIVERE DRIVE  
NAVARRE, FL 32566

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 6052  
NAVARRE, FL 32566

**New Mailing Address:**

**FEI Number:** 27-2827734

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

RUTLEDGE, DIANE M  
9294 VANDIVERE DRIVE  
NAVARRE, FL 32566 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: P  
Name: RUTLEDGE, DIANE M  
Address: 9294 VANDIVERE DRIVE  
City-St-Zip: NAVARRE, FL 32566 US

Title: VP  
Name: LYCAN, JAYE  
Address: 1772 IVALEA CIRCLE  
City-St-Zip: NAVARRE, FL 32566 US

Title: T  
Name: VINCENT, TIM  
Address: 8196 LUCENA STREET  
City-St-Zip: NAVARRE, FL 32566 US

Title: G  
Name: YANTCH, RAY  
Address: 1440 PARADISE POINT DR UNIT 8  
City-St-Zip: NAVARRE, FL 32566 US

Title: G  
Name: BOECKMANN, JODY  
Address: 209 W. MIRACLE STRIP, G-201  
City-St-Zip: MARY ESTHER,, FL 32569 US

Title: S  
Name: VINCENT, BETSY  
Address: 8196 LUCENA STREET  
City-St-Zip: NAVARRE, FL 32566 US

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:** TIM VINCENT

TREA

04/29/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date