2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N26959

FILED Apr 10, 2008 Secretary of State

Entity Name: POLYNESIAN ISLES RESORT CONDOMINIUM IV ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: 3045 POLYNESIAN ISLES BLVD KISSIMMEE, FL 34746 **Current Mailing Address: New Mailing Address:** ATTN: LINDA RIDDLE 3865 W. CHEYENNE AVE N. LAS VEGAS, NV 89032 FEI Number: 59-2987630 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: **BECKER & POLIAKOFF** 2500 MAITLAND CENTER PARKWAY #209 MAITLAND, FL 32751 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change () Addition BYRD, TERRY BYRD, TERRY Name: Name: 3636 BREWTON CT Address: 3636 BREWTON CT Address: CLEARWATER, FL 33761 City-St-Zip: City-St-Zip: CLEARWATER, FL 33761 Title: VD () Delete Title: DV (X) Change () Addition Name: THOMAS, LAMAR Name: JOHNSON, RICK Address: 3 OCEANS WEST BL. APT 5D5 Address: 3730 BROCK ROAD, RR #5 City-St-Zip: DAYTONA BEACH, FL 32118 City-St-Zip: CLAREMONT, ONTARIO, CANADA, CA L1Y 1A2 Title: STD () Delete Title: () Change () Addition SKORA, PHYLLIS Name: Name: Address: 32351 TECLA DR Address: City-St-Zip: WARREN, MI 48088 City-St-Zip: Title: () Delete Title: AS () Change (X) Addition WINDSOR, MARILYN Name: Name: Address: Address: 3865 W. CHEYENNE AVE. City-St-Zip: City-St-Zip: NORTH LAS VEGAS, NV 89032

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: MARILYN WINDSOR AS 04/10/2008