2006 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED May 15, 2006 DOCUMENT# N28711 Secretary of State

Entity Name: PACE ISLAND OWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

463499 SR 200 YULEE, FL 32097 US

Current Mailing Address: New Mailing Address:

P O BOX 1987

YULEE, FL 32097 US

FEI Number: 59-2927306 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:

PROPERTY MANAGEMENT SYSTEMS, INC 463499 STATE ROAD 200 YULEE, FL 32097

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:

Date

Electronic Signature of Registered Agent

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

VSD () Delete (X) Change () Addition

ROLLINS, SARAH ROLLINS, SARAH Name: Name: 1478 RUSH LANE Address: 1478 RUSH LANE Address:

City-St-Zip: ORANGE PARK, FL 32003 City-St-Zip: ORANGE PARK, FL 32003

Title: () Delete Title: () Change () Addition

Name: GERWE, FRANK Name: Address: 1552 SILVER BELL LN Address: City-St-Zip: ORANGE PARK, FL 32003 City-St-Zip:

Title: () Delete Title: () Change () Addition

KAZIMAR, MIKE Name: Name: Address: 1860 BLUE BONNET WAY Address: City-St-Zip: ORANGE PARK, FL 32003 City-St-Zip:

Title: TD () Delete Title: () Change () Addition

Name: JEAKLE, JERRY Name: 1804 HOLLY FLOWER LN Address: Address: City-St-Zip: ORANGE PARK, FL 32003 City-St-Zip:

Title: Title: P/DD () Delete () Change () Addition

PINHO, MICHAEL Name: Name: 2242 SALT MYRTLE LANE Address: Address: City-St-Zip: ORANGE PARK, FL 32003 City-St-Zip:

Title: () Delete Title: () Change (X) Addition

HARRINGTON, ROBERT Name: Name: Address: Address: 1473 RUSH LANE ORANGE PARK, FL 32003 US City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: MICHAEL PINHO PDD 05/15/2006