

2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Apr 21, 2009
Secretary of State

DOCUMENT# N31871

Entity Name: ISLAND DUNES OCEANSIDE II CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**8800 S. OCEAN DR
JENSEN BEACH, FL 34957**New Principal Place of Business:****Current Mailing Address:**8800 S. OCEAN DR
JENSEN BEACH, FL 34957**New Mailing Address:****FEI Number:** 85-0142129**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**JACKSON, GERRY CPA
150 SW CHAMBER COURT
SUITE 202
PORT SAINT LUCIE, FL 34986 US**Name and Address of New Registered Agent:**JACKSON, GERALD CPA
150 SW CHAMBER COURT
SUITE 202
PORT SAINT LUCIE, FL 34986 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: GERALD JACKSON JR CPA

04/21/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: TD () Delete
Name: DYKE, JOHN MR
Address: 8800 S OCEAN DR, 1207
City-St-Zip: JENSEN BEACH, FL 34957

Title: SD () Delete
Name: LAVELLE, MONICA MRS
Address: 8800 S. OCEAN DR 405
City-St-Zip: JENSEN BEACH, FL 34957

Title: D () Delete
Name: HADDAD, RICHARD MR
Address: 8800 S OCEAN DR, 1405
City-St-Zip: JENSEN BEACH, FL 34957

Title: PD () Delete
Name: BLACK, LOUIS MR.
Address: 8800 S. OCEAN DR #601
City-St-Zip: JENSEN BEACH, FL 34957

Title: VPD () Delete
Name: STANEK, JOHN MR
Address: 8800 S. OCEAN DR #608
City-St-Zip: JENSEN BEACH, FL 34957

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: SD (X) Change () Addition
Name: REIM, MARIAN DR
Address: 8800 S. OCEAN DR 405
City-St-Zip: JENSEN BEACH, FL 34957

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: LOUIS BLACK

PD

04/21/2009

Electronic Signature of Signing Officer or Director

Date