## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N37678

FILED Apr 27, 2009 Secretary of State

Entity Name: INTERNATIONAL CENTER PROPERTY OWNERS' ASSOCIATION, INC.

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
	STWOOD BLVI O, FL 32821	).			
Current N	/lailing Addres	s:	New Mailing Addre	ss:	
	STWOOD BLVI O, FL 32821	).			
FEI Number	r: 59-3173300	FEI Number Applied For()	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and	d Address of C	urrent Registered Agent:	Name and Address	of New Registered Agent:	
6817 WES ORLANDS The above	KE, RICHARD STWOOD BLVE O, FL 32821 e named entity see of Florida.	US	ourpose of changing its register	ed office or registered agent, or both,	
SIGNATU	RE:				
	Electron	ic Signature of Registered Age	ent	Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG		
OFFICER	S AND DIREC	IORS:	ADDITIONS/CHANG	SES TO OFFICERS AND DIRECTORS	
OFFICER Title: Name: Address: City-St-Zip:	D () TAYLOR, MICH	Delete AEL ID AVE., STE 350	Title: Name: Address: City-St-Zip:	GES TO OFFICERS AND DIRECTORS:  ( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip: Title: Name: Address:	D () TAYLOR, MICH 5000 MARYLAN SAINT LOUIS, N	Delete AEL ID AVE., STE 350 /IO 63105 Delete CHARD	Title: Name: Address:		
Title: Name: Address:	D () TAYLOR, MICH 5000 MARYLAN SAINT LOUIS, N  DP () VAN SLYKE, RI 6817 WESTWO ORLANDO, FL	Delete AEL ID AVE., STE 350 IO 63105  Delete CHARD OOD BLVD.  Delete BOR DR.	Title: Name: Address: City-St-Zip: Title: Name: Address:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: Address: Address:	D () TAYLOR, MICH 5000 MARYLAN SAINT LOUIS, M  DP () VAN SLYKE, RI 6817 WESTWO ORLANDO, FL  D () BROWN, DAN 7007 SEA HARI ORLANDO, FL	Delete AEL ID AVE., STE 350 IO 63105  Delete CHARD OOD BLVD.  Delete BOR DR. 32821  Delete	Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address:	( ) Change ( ) Addition ( ) Change ( ) Addition	

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: RICHARD N. VAN SLYKE DP 04/27/2009