2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N46739

FILED Feb 05, 2010 Secretary of State

Entity Name: THE ISLES ASSOCIATION, INC.

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

C/O SWIFT MGMT 1750 UNIVERSITY DR 205 POMPANO BEACH, FL 33071 US

Current Mailing Address: New Mailing Address:

C/O SWIFT MGMT 1750 UNIVERSITY DR 205 POMPANO BEACH, FL 33071 US

FEI Number: 65-0331886 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:

SWIFT MGMT SOLUTION SWIFT MGMT SOLUTIONS 1750 UNIVERSITY DR 1750 UNIVERSITY DR STE 205 STE 205

POMPANO BEACH, FL 33071 US POMPANO BEACH, FL 33071 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: NICOLE SWIFT

NICOLE SWIFT 02/05/2010

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: [

Name: PILLINGER, DENNIS Address: 12148 NW 9 DR

City-St-Zip: CORAL SPRINGS, FL 33071

Title: TD

Name: RICCIARDI, SAL Address: 12069 NW 9 CT

City-St-Zip: CORAL SPRINGS, FL 33071

Title: PD

 Name:
 HOROWITZ, TERRY

 Address:
 1033 NW 121ST WAY

 City-St-Zip:
 CORAL SPRINGS, FL 33071

Title: VPD

Name: ROBINSON, WILLIAM
Address: 12163 NW 10TH MANOR
City-St-Zip: CORAL SPRINGS, FL 33071

Title: SD

 Name:
 BERLIN, JUDY

 Address:
 1051 NW 121ST TERR

 City-St-Zip:
 POMPANO BEACH, FL 33071

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: TERRY HOROWITZ PD 02/05/2010