

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 26, 2008 8:00 am
Secretary of State

03-26-2008 90022 029 ****61.25

DOCUMENT # N96000005043					
1. Entity Name ISLAND VILLAGE OWNERS ASSOCIATION, INC.					
Principal Place of Business % J. THOMPSON 2054 VILLAGE LANE FERNANDINA BEACH, FL 32034 US			Mailing Address PO BOX 15543 FERNANDINA BEACH, FL 32035 US		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 59-3426818	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent ISLAND VILLAGE HOMEOWNERS ASSOC. 2068 VILLAGE LANE FERNANDINA BEACH, FL 32034			7. Name and Address of New Registered Agent Name <u>Island Village Homeowners Assoc</u> Street Address (P.O. Box Number is Not Acceptable) <u>2054 Village Lane</u> City <u>Fernandina Beach</u> <u>FL</u> Zip Code <u>32034</u>		
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE <u>Janet Thompson</u> <small>Signature, typed or printed name of registered agent and title if applicable.</small>		<u>Janet Thompson</u> <small>(NOTE: Registered Agent signature required when reinstating)</small>		DATE <u>3/22/08</u>	
Filing Fee is \$61.25 Due by May 1, 2008		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input type="checkbox"/> Delete WEBBER, JUDITH 2058 VILLAGE LANE FERNANDINA BEACH, FL 32034		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition DAVID VIGH 2018 Village Lane Fernandina Beach, FL 32034	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input type="checkbox"/> Delete GIBSON, KURTZ 2051 VILLAGE LN FERNANDINA BEACH, FL 32034		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Robert Swan 2044 Village Lane Fernandina Beach, FL 32034	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input type="checkbox"/> Delete DUNN, BARBARA 2055 VILLAGE LANE FERNANDINA BEACH, FL 32034		<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input type="checkbox"/> Delete ROGERS, RONNIE 2016 VILLAGE LN FERNANDINA BEACH, FL 32034		<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input type="checkbox"/> Delete THOMPSON, JANET 2054 VILLAGE LANE FERNANDINA BEACH, FL 32034		<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input type="checkbox"/> Delete SMITH, RICHARD 2932 ROBERT OLIVER AVENUE FERNANDINA BEACH, FL 32034		<input type="checkbox"/> Change <input type="checkbox"/> Addition		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with all other like empowered.					
SIGNATURE: <u>Janet Thompson, Janet Thompson, Sec/Tre.</u> <u>3/22/08</u> <u>904-277-7686</u>					
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					
<small>Date</small>					
<small>Daytime Phone #</small>					