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Jul 01 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N97000001057 (5)
1. Corporation Name
Island Crossings II Homeowners Association, Inc.

Principal Place of Business: 555 Winderley Place, Suite 420, Maitland, FL 32751
Mailing Address: 555 Winderley Place, Suite 420, Maitland, FL 32751

3. Date Incorporated or Qualified: 2/20/97
4. FEI Number: 59-3437857
5. Certificate of Status Desired: \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees
7. Is this nonprofit corporation a homeowners association? Yes No
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No

2. Principal Place of Business: 21 Suite, Apt. #, etc.
22 City & State: 23 Melbourne Beach FL
24 Zip: 25 32951
26 Mailing Address: 26 P.O. Box 510094
27 Suite, Apt. #, etc.
28 City & State: 28 Melbourne Beach FL
29 Zip: 29 32951
30 Country: 30 USA

9. Name and Address of Current Registered Agent
Richard Wrenn
All Around Condo
406 Ave. B
Melbourne Beach, FL 32951

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 FL
Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.
SIGNATURE: Richard Wrenn
NOTE: Registered Agent signature required when reinstating. DATE: 5/18/98

12. OFFICERS AND DIRECTORS

TITLE	D	NAME	Rushnell, Devon	STREET ADDRESS	555 Winderley Place, Suite 420	CITY-ST-ZIP	Maitland, FL 32751	<input type="checkbox"/> DELETE
TITLE	D	NAME	Cupp, Christin	STREET ADDRESS	555 Winderley Place, Suite 420	CITY-ST-ZIP	Maitland, FL 32751	<input checked="" type="checkbox"/> DELETE
TITLE	D	NAME	Paratore, Lou	STREET ADDRESS	555 Winderley Place, Suite 420	CITY-ST-ZIP	Maitland, FL 32751	<input checked="" type="checkbox"/> DELETE
TITLE		NAME		STREET ADDRESS		CITY-ST-ZIP		<input type="checkbox"/> DELETE
TITLE		NAME		STREET ADDRESS		CITY-ST-ZIP		<input type="checkbox"/> DELETE
TITLE		NAME		STREET ADDRESS		CITY-ST-ZIP		<input type="checkbox"/> DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	DV	1.2 NAME	Rushnell, Devon	1.3 STREET ADDRESS	555 Winderley Place, Suite 420	1.4 CITY-ST-ZIP	Maitland, FL 32751	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.1 TITLE	DST	2.2 NAME	Ireland, Mary Ellen	2.3 STREET ADDRESS	555 Winderley Place, Suite 420	2.4 CITY-ST-ZIP	Maitland, FL 32751	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.1 TITLE		3.2 NAME		3.3 STREET ADDRESS		3.4 CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.1 TITLE	DP	4.2 NAME	O'Sullivan, Charles	4.3 STREET ADDRESS	555 Winderley Place, Suite 420	4.4 CITY-ST-ZIP	Maitland, FL 32751	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
5.1 TITLE		5.2 NAME		5.3 STREET ADDRESS		5.4 CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.1 TITLE		6.2 NAME		6.3 STREET ADDRESS		6.4 CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: [Signature]
DATE: 5/18/98 (401) 638-1313

CR2E037 (10/97)