

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000050787

Entity Name: ISLAND WAY TRADING, INC.

FILED
Jan 24, 2008
Secretary of State

Current Principal Place of Business:

11905 LAKE SHORE PLACE
NORTH PALM BEACH, FL 33408

New Principal Place of Business:

11920 U.S. HIGHWAY 1
NORTH PALM BEACH, FL 33408

Current Mailing Address:

11905 LAKE SHORE PLACE
NORTH PALM BEACH, FL 33408

New Mailing Address:

11920 U.S. HIGHWAY 1
NORTH PALM BEACH, FL 33408

FEI Number: 65-1147461

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEE, MELISSA
11905 LAKE SHORE PLACE
NORTH PALM BEACH, FL 33408 US

Name and Address of New Registered Agent:

MCCRACKEN, THOMAS F
11920 U.S. HIGHWAY 1
NORTH PALM BEACH, FL 33408 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: THOMAS F. MCCracken

01/24/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MCCracken, THOMAS F
Address: 11905 LAKE SHORE PLACE
City-St-Zip: NORTH PALM BEACH, FL 33408

Title: VD () Delete
Name: LEE, MELISSA
Address: 11905 LAKE SHORE PLACE
City-St-Zip: NORTH PALM BEACH, FL 33408

Title: STD (X) Delete
Name: LEE, BRIAN K
Address: 11905 LAKE SHORE PLACE
City-St-Zip: NORTH PALM BEACH, FL 33408

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: MCCracken, THOMAS F
Address: 11920 U.S. HIGHWAY 1
City-St-Zip: NORTH PALM BEACH, FL 33408

Title: STD (X) Change () Addition
Name: MCCracken, THOMAS F
Address: 11920 US HIGHWAY 1
City-St-Zip: N. PALM BEACH, FL 33408

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: THOMAS F. MCCracken

PD

01/24/2008

Electronic Signature of Signing Officer or Director

Date