2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P02000112393

Address:

City-St-Zip:

2430 VANDERBILT BEACH RD

NAPLES, FL 34109 US

Entity Name: ISLANDER HOLDINGS INC

FILED May 01, 2003 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 2430 VANDERBILT BEACH SUITE 108-345 NAPLES, FL 34109 **New Mailing Address: Current Mailing Address:** 2430 VANDERBILT BEACH 3363 CAYMAN LANE SUITE 108-345 NAPLES, FL 34119 US NAPLES, FL 34109 FEI Number: 81-0574786 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: COFER, JOHN 2430 VÁNDERBILT BEACH RD SUITE 108-345 NAPLES, FL 34109 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition COFER, JOHN Name: Name: 2430 VANDERBILT BEACH RD Address: Address: City-St-Zip: NAPLES, FL 34109 US City-St-Zip: Title: VΡ () Delete Title: () Change () Addition Name: JOSEPH, FASULA Name: 2430 VANDERBILT BEACH RD Address: Address: NAPLES, FL 34109 US City-St-Zip: City-St-Zip: Title: Title: () Delete () Change () Addition BROWN, KIMBER-LEE Name: Name: 2430 VANDERBILT BEACH RD Address: Address: City-St-Zip: NAPLES, FL 34109 US City-St-Zip: Title: SEC () Delete Title: () Change () Addition TAMAYO, ERIK Name: Name:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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.

Address:

City-St-Zip:

SIGNATURE: JOHN COFER P 05/01/2003