2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 16, 2006
Secretary of State

DOCUMENT# P03000131325

Entity Name: ISLANDS WEST RESORT, INC.

Current Principal Place of Business:

3605 GULF DRIVE
HOLMES BEACH, FL 34217

New Principal Place of Business:

Current Mailing Address:

5010 GULF OF MEXICO DRIVE
LONGBOAT KEY, FL 34228

New Mailing Address:

P.O. BOX 2769
HIGHLANDS, NC 28741

FEI Number: 20-0389850 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SHEA, JOHN J
2940 SOUTH TAMIAMI TRAIL
SARASOTA, FL 34239 US

Name and Address of New Registered Agent:

SHEA, JOHN J
269 S. OSPREY AVE., STE 100
SARASOTA, FL 34236 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: JOHN J. SHEA 08/16/2006
Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: DIR ( ) Delete
Name: MESSER, BARRY W
Address: 5010 GULF OF MEXICO DRIVE
City-St-Zip: LONGBOAT KEY, FL 34228

Title: DIR ( ) Delete
Name: MESSER, GWENDOLYN S
Address: 5010 GULF OF MEXICO DRIVE
City-St-Zip: LONGBOAT KEY, FL 34228

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: MESSER, BARRY W
Address: P.O. BOX 2769
City-St-Zip: HIGHLANDS, NC 28741

Title: VP (X) Change ( ) Addition
Name: MESSER, GWENDOLYN S
Address: P.O. BOX 2769
City-St-Zip: HIGHLANDS, NC 28741

I hereby certify that the information supplied with this filing does not qualify for the 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: GWENDOLYN S. MESSER VP 08/16/2006
Electronic Signature of Signing Officer or Director Date