2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000110235

Entity Name: ISLAND ARCADE INC.

FILED Aug 14, 2006 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:

4376 EAST OCEAN BLVD
JENSEN BEACH, FL 34957

4376 EAST OCEAN BLVD
JENSEN BEACH, FL 34957

US

Current Mailing Address: New Mailing Address:

1708 ST LUCIE CT 6608 HULDA DRIVE FT PIERCE, FL 34949 FT PIERCE, FL 34951

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

RAGAN, MARTHA
3668 S. 25TH STREET
FT PIERCE, FL 34982 US
POPE, PATRICIA A
6608 HULDA DRIVE
FT PIERCE, FL 34951 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: PATRICIA A. POPE 08/14/2006

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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

US

Title: P () Delete Title: P (X) Change () Addition
Name: RAGAN, MARTHA Name: ORR, MARK C
Address: 3668 S 35TH ST

 Address:
 3668 S. 25TH ST
 Address:
 6608 HULDA DRIVE

 City-St-Zip:
 FT PIERCE, FL 34982
 City-St-Zip:
 FT PIERCE, FL 34951 US

Title: VP () Delete Title: VP (X) Change () Addition
Name: FASNACHT, LISA Name: ORR, MARK C
Address: 4709 ST. LICHE OT

 Address:
 1708 ST LUCIE CT
 Address:
 6608 HULDA DRIVE

 City-St-Zip:
 FT PIERCE, FL 34949
 City-St-Zip:
 FT PIERCE, FL 34951 US

Title: SECR () Change (X) Addition

 Name:
 Name:
 POPE, PATRICIA A

 Address:
 Address:
 6608 HULDA DRIVE

 City-St-Zip:
 City-St-Zip:
 FT PIERCE, FL 34951 US

Title: () Delete Title: TREA () Change (X) Addition

 Name:
 Name:
 POPE, PATRICIA A

 Address:
 Address:
 6608 HULDA DRIVE

 City-St-Zip:
 City-St-Zip:
 FT PIERCE, FL 34951 US

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: MARK C. ORR PRES 08/14/2006