

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000011728

FILED  
Feb 03, 2009  
Secretary of State

Entity Name: ISLAND COMPUTER TECHNOLOGY, INC.

**Current Principal Place of Business:**

18 BOUGAINVILLEA AVE  
KEY WEST, FL 33040

**New Principal Place of Business:**

**Current Mailing Address:**

18 BOUGAINVILLEA AVE  
KEY WEST, FL 33040

**New Mailing Address:**

FEI Number: 37-1549346

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MANSELL, MERYL  
18 BOUGAINVILLEA AVE  
KEY WEST, FL 33040 US

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

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:**

Title: P ( ) Delete  
Name: LANGDALE, LYNN  
Address: 18 BOUGAINVILLEA AVE  
City-St-Zip: KEY WEST, FL 33040

Title: VT ( ) Delete  
Name: MANSELL, MERYL  
Address: 18 BOUGAINVILLEA AVE  
City-St-Zip: KEY WEST, FL 33040

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: LYNN LANGDALE

P

02/03/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date