

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P10000058166

Entity Name: ITALY IN THE ISLES INC

**FILED**  
**Feb 02, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

62 COLUMBUS DRIVE  
ISLAMORADA, FL 33036 US

**New Principal Place of Business:**

82758 OVERSEAS HIGHWAY  
ISLAMORADA, FL 33036 US

**Current Mailing Address:**

62 COLUMBUS DRIVE  
ISLAMORADA, FL 33036 US

**New Mailing Address:**

82758 OVERSEAS HIGHWAY  
ISLAMORADA, FL 33036 US

FEI Number: 27-3294113

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

SWAIN, TOWHEE  
62 COLUMBUS DRIVE  
ISLAMORADA, FL 33036 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

**OFFICERS AND DIRECTORS:**

Title: P/D  
Name: SWAIN, BRETT  
Address: 62 COLUMBUS DRIVE  
City-St-Zip: ISLAMORADA, FL 33036 US

Title: VP/D  
Name: SWAIN, TOWHEE  
Address: 62 COLUMBUS DRIVE  
City-St-Zip: ISLAMORADA, FL 33036 US

Title: CFO  
Name: RILEY, PETER F  
Address: 100 PRIMROSE LANE  
City-St-Zip: LONG KEY, FL 30001

I hereby 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 all other like empowered.

SIGNATURE: TOWHEE SWAIN

VP

02/02/2011

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

\_\_\_\_\_  
Date