2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 18, 2006
Secretary of State

DOCUMENT# P95000004147

Entity Name: ISLAND HUTWORKS, INC.

Current Principal Place of Business:

100 S. SPOOKY LANE
#4D
SANTA ROSA BEACH, FL 32459

New Principal Place of Business:

815 N. HOMESTEAD BOULEVARD
HOMESTEAD, FL 33033

Current Mailing Address:

PO BOX 1689
SANTA ROSA, FL 32459

New Mailing Address:

815 N. HOMESTEAD BOULEVARD
BOX 246
HOMESTEAD, FL 33033

FEI Number: 59-3298193 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

POOL, TROY D
100 S. SPOOKY LN
#4D
SANTA ROSA BEACH, FL 32459 US

Name and Address of New Registered Agent:

POOL, TROY D
815 N. HOMESTEAD BOULEVARD
#246
HOMESTEAD, FL 33033 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: _____ 03/18/2006
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: VP ( ) Delete
Name: LENARD, THOMAS A
Address: 89351 OVERSEAS HWY
City-St-Zip: PLANTATION KEY, FL 33070

Title: D (X) Delete
Name: DENNISON-POOL, JAN E
Address: 100 S. SPOOKY LN #4D
City-St-Zip: SANTA ROSA BEACH, FL 32459

Title: PTS ( ) Delete
Name: POOL, TROY DEAN
Address: 100 S. SPOOKY LANE # 40
City-St-Zip: SANTA ROSA BEACH, FL 32459

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: PTS (X) Change ( ) Addition
Name: POOL, TROY DEAN
Address: 815 N. HOMESTEAD BOULEVARD
City-St-Zip: HOMESTEADE, FL 33033

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: TROY DEAN POOL P 03/18/2006
Electronic Signature of Signing Officer or Director — Date