

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S58596

Entity Name: ISLAND CLASSICS, INC.

FILED  
Mar 24, 2009  
Secretary of State

## Current Principal Place of Business:

2076 INDIAN CREEK CT  
DUNEDIN, FL 34698 US

## New Principal Place of Business:

## Current Mailing Address:

2076 INDIAN CREEK CT  
DUNEDIN, FL 34698 US

## New Mailing Address:

FEI Number: 65-0323995

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

NELSON, DONALD K  
2076 INDIAN CREEK CT  
DUNEDIN, FL 34698 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: PD ( ) Delete  
Name: NELSON, JUDITH  
Address: 2076 INDIAN CREEK CT  
City-St-Zip: DUNEDIN, FL 34698 US

Title: VT ( ) Delete  
Name: NELSON, DONALD  
Address: 2076 INDIAN CREEK CT  
City-St-Zip: DUNEDIN, FL 34698 US

Title: VP ( ) Delete  
Name: EVANS, RONALD  
Address: 1568 AMBROSIA DR  
City-St-Zip: CLEARWATER, FL 33755

Title: VP ( ) Delete  
Name: EVANS, PAMELA  
Address: 1568 AMBROSIA DR  
City-St-Zip: CLEARWATER, FL 33755

Title: VP ( ) Delete  
Name: WRIGHT, HARMON  
Address: 14327 TEASDALE AVE  
City-St-Zip: HUDSON, FL 34667

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

Title: VP (X) Change ( ) Addition  
Name: WRIGHT, HARMON  
Address: 10849 OSCEOLA DR  
City-St-Zip: NEW PORT RICHEY, FL 34654

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: D. K. NELSON

MR

03/24/2009

Electronic Signature of Signing Officer or Director

Date