2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 24, 2014
Secretary of State
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Entity Name: ISLAND INN CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

9980 GULF BOULEVARD
TREASURE ISLAND, FL 33706

Current Mailing Address:

C/O LAMONT MANAGEMENT, INC.
250 104TH AVENUE
TREASURE ISLAND, FL 33706 US

FEI Number: 59-2130015

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LAMONT, SUE
C/O LAMONT MANAGEMENT, INC.
250 104TH AVENUE
TREASURE ISLAND, FL 33706 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: SUE LAMONT 02/24/2014

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	P	Title	VP
Name	SMITH, MICHAEL F	Name	BROWNLEE, CARL
Address	C/O LAMONT MANAGEMENT, INC. 250 104TH AVENUE	Address	C/O LAMONT MANAGEMENT, INC. 250 104TH AVENUE
City-State-Zip:	TREASURE ISLAND FL 33706	City-State-Zip:	TREASURE ISLAND FL 33706
Title	T	Title	VP
Name	MANINGS, JOEL	Name	DOHERTY, CHARLES
Address	C/O LAMONT MANAGEMENT, INC. 250 104TH AVENUE	Address	C/O LAMONT MANAGEMENT, INC. 250 104TH AVENUE
City-State-Zip:	TREASURE ISLAND FL 33706	City-State-Zip:	TREASURE ISLAND FL 33706
Title	D		
Name	MCCLELLAN, LACEY L		
Address	C/O LAMONT MANAGEMENT, INC. 250 104TH AVENUE		
City-State-Zip:	TREASURE ISLAND FL 33706		

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: MICHAEL SMITH PRESIDENT 02/24/2014

Electronic Signature of Signing Officer/Director Detail — Date