

**2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F42374

**Entity Name:** ISLAND ONE, INC.**Current Principal Place of Business:**6355 METROWEST BOULEVARD  
SUITE 180  
ORLANDO, FL 32835**Current Mailing Address:**6355 METROWEST BOULEVARD  
SUITE 180  
ORLANDO, FL 32835 US**FEI Number:** 59-2161490**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301-2525 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:**\_\_\_\_\_  
Electronic Signature of Registered Agent\_\_\_\_\_  
Date**Officer/Director Detail :**

Title	PRESIDENT, CEO
Name	WANG, MARK
Address	5323 MILLENIA LAKES BLVD SUITE 400
City-State-Zip:	ORLANDO FL 32839
Title	TREASURER
Name	LOPER, BEN
Address	5323 MILLENIA LAKES BLVD SUITE 400
City-State-Zip:	ORLANDO FL 32839
Title	ASST. SECRETARY
Name	LEMKE, BRANDON
Address	5323 MILLENIA LAKES BOULEVARD SUITE 400
City-State-Zip:	ORLANDO FL 32839

Title	SECRETARY, DIRECTOR
Name	CORBIN, CHARLES
Address	5323 MILLENIA LAKES BLVD SUITE 400
City-State-Zip:	ORLANDO FL 32839
Title	DIRECTOR, PRESIDENT
Name	MATHEWES, DANIEL
Address	5323 MILLENIA LAKES BLVD SUITE 400
City-State-Zip:	ORLANDO FL 32839
Title	ASST. SECRETARY
Name	LODDE, KELLY
Address	5323 MILLENIA LAKES BLVD
City-State-Zip:	ORLANDO FL 32839

*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:** BRANDON LEMKE**ASSISTANT SECRETARY** 04/23/2024\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date