

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# H03544

**FILED**  
**Apr 08, 2014**  
**Secretary of State**  
**CC1848775918**

**Entity Name:** ISLAND PINE CORPORATION

**Current Principal Place of Business:**

901 SOUTH FEDERAL HIGHWAY #101  
FORT LAUDERDALE, FL 33316

**Current Mailing Address:**

901 SOUTH FEDERAL HIGHWAY #101  
FORT LAUDERDALE, FL 33316 US

**FEI Number:** 59-2423263

**Certificate of Status Desired:** No

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

WILKES, JOHN P ESQ.  
901 SOUTH FEDERAL HIGHWAY #101  
FORT LAUDERDALE, FL 33316 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:** JOHN P WILKES

04/08/2014

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DP  
Name JOYNER, WILLIAMS A  
Address 901 S FEDERAL HIGHWAY SUITE 101  
City-State-Zip: FORT LAUDERDALE FL 33316

Title ST  
Name JOYNER, WILLIAMS A  
Address 901 S FEDERAL HIGHWAY SUITE 101  
City-State-Zip: FORT LAUDERDALE FL 33316

Title D  
Name JOYNER, ANNE K  
Address 901 S. FEDERAL HIGHWAY, SUITE 101  
City-State-Zip: FORT LAUDERDALE FL 33316

Title D  
Name JOYNER, ALLISON  
Address 901 S FEDERAL HIGHWAY SUITE 101  
City-State-Zip: FORT LAUDERDALE FL 33316

Title D  
Name JOYNER, WILLIAMS A JR.  
Address 901 S FEDERAL HIGHWAY SUITE 101  
City-State-Zip: FORT LAUDERDALE FL 33316

*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:** WILLIAMS A. JOYNER

DP

04/08/2014

Electronic Signature of Signing Officer/Director Detail

Date