#### 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. PRESIDENT

# SIGNATURE: WILLIAM C GRANT

Electronic Signature of Signing Officer/Director Detail

# 2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

#### DOCUMENT# P07000106262

### Entity Name: ISLAND AIRE OF SOUTHWEST FLORIDA, INC.

# **Current Principal Place of Business:**

5651 HALIFAX AVE. SUITE 6 FORT MYERS, FL 33912

## **Current Mailing Address:**

5651 HALIFAX AVE. SUITE 6 FORT MYERS, FL 33912

# FEI Number: 26-1156916

# Name and Address of Current Registered Agent:

GRANT, WILLIAM CPRES. 5651 HALIFAX AVE. SUITE 6 FORT MYERS, FL 33912 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:

# Officer/Director Detail :

Officer/Director Detail :			
Title	PVPS	Title	TD
Name	GRANT, WILLIAM C	Name	GRANT, WILLIAM C
Address	5651 HALIFAX, SUITE 6	Address	5651 HALIFAX, SUITE 6
City-State-Zip:	FORT MYERS FL 33912	City-State-Zip:	FORT MYERS FL 33912

Electronic Signature of Registered Agent

Certificate of Status Desired: No

03/17/2014

Date

Date

## FILED Mar 17, 2014 Secretary of State CC1051208373