

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P08000021332

**Entity Name:** TRUE ISLAND ADVENTURES, INC

**Current Principal Place of Business:**

81611 OLD HIGHWAY  
ISLAMORADA, FL 33036

**Current Mailing Address:**

PO BOX 631  
ISLAMORADA, FL 33036

**FEI Number: 26-2144556**

**Certificate of Status Desired: No**

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

HAGOOD, BRETT J  
81611 OLD HIGHWAY  
ISLAMORADA, FL 33036 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            P  
Name            HAGOOD, BRETT J  
Address        81611 OLD HIGHWAY  
City-State-Zip: ISLAMORADA FL 33036

*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: BRETT HAGOOD**

**P**

**03/11/2015**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date