

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Matham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 724786 (9)

1. Corporation Name

ISLAND POINT, INC., NO. 1, A CONDOMINIUM

FILED

95 FEB 28 AM 4: 27

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

Principal Place of Business

Mailing Address

% PROGRESSIVE MANAGEMENT, INC
2753 SR 580, SUITE 207
CLEARWATER FL 34621

% PROGRESSIVE MANAGEMENT, INC
2753 SR 580, SUITE 207
CLEARWATER FL 34621

3. Date Incorporated or Qualified

11/13/1972

3a. Date of Last Report

03/10/1994

4. FEI Number

59-1699773

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

7. Nonprofit with IRS 501(c)(3)

☐

\$68.75 Supplemental
Fee Not Required

Tax Exempt Status

☐

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes

☐

Yes

☒

No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

REARDON, MAUREEN C.
2753 S.R. 580, SUITE 207
CLEARWATER FL 34621

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when resigning)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	PD
NAME	BOBLINZ, RICHARD
STREET ADDRESS	644 ISLAND WAY #501
CITY - ST - ZIP	CLEARWATER FL
TITLE	VD
NAME	CONOVER, DOROTHY
STREET ADDRESS	644 ISLAND WAY #107
CITY - ST - ZIP	CLEARWATER, FL 0
TITLE	SD
NAME	PARISI, JUNE
STREET ADDRESS	644 ISLAND WAY #702
CITY - ST - ZIP	CLEARWATER, FL 0
TITLE	D
NAME	LACROIX, ARTHUR
STREET ADDRESS	644 ISLAND WAY #203
CITY - ST - ZIP	CLEARWATER FL
TITLE	TD
NAME	BROWER, LOUIS
STREET ADDRESS	644 ISLAND WAY #404
CITY - ST - ZIP	CLEARWATER FL
TITLE	D
NAME	RUNNELS, DONALD
STREET ADDRESS	644 ISLAND WAY #307
CITY - ST - ZIP	CLEARWATER FL

1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
2.1 TITLE	☐ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	
3.1 TITLE	☒ Change ☐ Addition
3.2 NAME	S/O COLLARD, MARIE
3.3 STREET ADDRESS	644 ISLAND WAY #508
3.4 CITY - ST - ZIP	CLEARWATER FL 34630
4.1 TITLE	☒ Change ☐ Addition
4.2 NAME	DOWLING, LESLIE
4.3 STREET ADDRESS	644 ISLAND WAY #502
4.4 CITY - ST - ZIP	CLEARWATER FL 34630
5.1 TITLE	☒ Change ☐ Addition
5.2 NAME	D
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	☐ Change ☒ Addition
6.2 NAME	GUFFREDA, EDITH
6.3 STREET ADDRESS	644 ISLAND WAY #103
6.4 CITY - ST - ZIP	CLEARWATER FL 34630

14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(5)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

R. Boblinz BOBLINZ, RICHARD

FEB 2, 1995 813.461-5488

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Chapter 110.07