

**2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Feb 16, 2011  
Secretary of State**

DOCUMENT# 747912

**Entity Name:** THE VILLAGE ON ISLAND ESTATES CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

251 WINDWARD PASSAGE  
SUITE F  
CLEARWATER, FL 33767 US

**New Principal Place of Business:**

**Current Mailing Address:**

251 WINDWARD PASSAGE  
SUITE F  
CLEARWATER, FL 33767 US

**New Mailing Address:**

**FEI Number:** 59-1957145      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

JIM NOBLES MANAGEMENT, INC  
251 WINDWARD PASSAGE  
SUITE F  
CLEARWATER, FL 33767 US

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

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

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: RICCI, JOHN  
Address: 240 WINDWARD PASSAGE #303  
City-St-Zip: CLEARWATER BEACH, FL 33767 US

Title: VPD  
Name: LYBRAND, STEVE  
Address: 240 WINDWARD PASSAGE #605  
City-St-Zip: CLEARWATER BEACH, FL 33767 US

Title: TD  
Name: WERNER, TERRY  
Address: 240 WINDWARD PASSAGE #1002  
City-St-Zip: CLEARWATER BEACH, FL 33767 US

Title: SD  
Name: ULRICH, JEAN  
Address: 240 WINDWARD PASSAGE #1102  
City-St-Zip: CLEARWATER, FL 33767 US

Title: D  
Name: DICKSON, JACK  
Address: 240 WINDWARD PASSAGE #304  
City-St-Zip: CLEARWATER, FL 33767 US

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JOHN RICCI

PD

02/16/2011

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date