

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 749991

FILED  
Jul 22, 2008  
Secretary of State

Entity Name: ISLAND VIEW CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

241 SKIFF PT. #4  
CLEARWATER, FL 33767

**New Principal Place of Business:**

241 SKIFF PT. #3  
CLEARWATER, FL 33767

**Current Mailing Address:**

241 SKIFF PT. #4  
CLEARWATER, FL 33767

**New Mailing Address:**

FEI Number: 59-1978983      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

JOHNSON, ROBERT  
241 SKIFF PT. #4  
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      ( ) Delete  
Name: JOHNSON, ROBERT  
Address: 241 SKIFF PT #2  
City-St-Zip: CLEARWATER BEACH, FL 33767

Title: V      ( ) Delete  
Name: MERCER, ERIC  
Address: 231 SKIFF PT. #5  
City-St-Zip: CLEARWATER BEACH, FL 33767

Title: TR      ( ) Delete  
Name: LONG, ROBIN J  
Address: 241 SKIFF PT, # 3  
City-St-Zip: CLEARWATER, FL 33764

Title: SD      ( ) Delete  
Name: FLOYD, JUDY  
Address: 241 SKIFF PT, # 2  
City-St-Zip: CLEARWATER BEACH, FL 33767

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD      (X) Change ( ) Addition  
Name: FLOYD, ROBERT  
Address: 241 SKIFF PT #2  
City-St-Zip: CLEARWATER BEACH, FL 33767

Title: V      (X) Change ( ) Addition  
Name: DAUGHTRY, ED  
Address: 231 SKIFF PT. #8  
City-St-Zip: CLEARWATER BEACH, FL 33767

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: ROBIN LONG

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

TRES

07/22/2008

\_\_\_\_\_ Date