9/10/01-90047-001-$61.25-$61.25

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
01 SEP 28 PM 1:32

DOCUMENT # 756738

1. Entity Name

ISLANDIA EAST ASSOCIATION, INC.

Principal Place of Business	Mailing Address
9500 S OCEAN DRIVE JENSEN BCH FL 34957 US	C/O ISLANDIA II CONDOMINIUM ASSOC., INC. ~~9500 S. OCEAN DRIVE~~ ~~JENSEN BEACH FL 34957~~ 735 Colorado Ave. Suite 3 Stuart, FL 34994
2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-2245771 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
~~EVANS, DARRELL~~ ~~9500 S OCEAN DR~~ ~~#203~~ ~~JENSEN BEACH FL 34957~~ Bristol Management 735 Colorado Ave Suite 3 STUART, FL. 34996	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

8. 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 Steve Ingalls PCM 9-25-01
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25
After September 12, 2001, min. will be $236.25

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P LOWENS, DAVID 9500 S OCEAN DR., #1602 JENSEN BEACH FL 34957	☑ Delete	P Gunter Strobel 9550 S. Ocean Dr #1404 Jensen Bch, FL 34957	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP WOLF, SHEILA 9550 S OCEAN DRIVE JENSEN BEACH FL 34957	☑ Delete	VP Nancy Vallejo 9550 S. Ocean Dr # 1104 Jensen Bch, FL 34957	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D FERINA, LORRAINE 9500 S. OCEAN DR. PH-2 JENSEN BEACH FL 34957	☑ Delete	ST Wanda Hostra 9500 S. Ocean Dr # 2004 Jensen Bch, FL 34957	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	ST STEVENS, DAVE 9500 S OCEAN DR, PH3 JENSEN BCH. FL 34957	☑ Delete	D Frank Sandao 9550 S. Ocean Dr # 1206 Jensen Bch, FL 34957	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D KAPTAIN, MIM 9500 S OCEAN DR, 1206 JENSEN BCH FL	☑ Delete	D Allen Coutsch 9550 S. Ocean Dr #1701 Jensen Bch, FL 34957	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition SP

CR2E037 (5/01)

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: SIGNATURE REQUIRED 9-31-01
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #