

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000006450

FILED
Apr 25, 2004
Secretary of State**Entity Name:** IBIS COVE MASTER PROPERTY OWNERS ASSOCIATION, INC.**Current Principal Place of Business:**4206 ENTERPRISE AVE UNIT A-7
NAPLES, FL 34104**New Principal Place of Business:**265 AIRPORT ROAD
NAPLES, FL 34104**Current Mailing Address:**4206 ENTERPRISE AVE UNIT A-7
NAPLES, FL 34104**New Mailing Address:**265 AIRPORT ROAD SOUTH
NAPLES, FL 34104**FEI Number:** 59-3677739**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**ELIAS, OVADIA R
4206 ENTERPRISE AVE UNIT A-7
NAPLES, FL 34104 US**Name and Address of New Registered Agent:**R&P PROPERTY MANAGEMENT
265 AIRPORT ROAD SOUTH
NAPLES, FL 34104 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: GLENN CARROLL

04/25/2004

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:**Title:** PD () Delete
Name: ELIAS, OVADIA R
Address: 4206 ENTERPRISE AVE UNIT A-7
City-St-Zip: NAPLES, FL 34104**Title:** VD () Delete
Name: ALICE, MEIR
Address: 4206 ENTERPRISE AVE UNIT A-7
City-St-Zip: NAPLES, FL 34104**Title:** TSD () Delete
Name: RICE, GEORGE B
Address: 4012 CRAYTON ROAD
City-St-Zip: NAPLES, FL 34103**Title:** () Delete
Name:
Address:
City-St-Zip:**Title:** () Delete
Name:
Address:
City-St-Zip:**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** PD (X) Change () Addition
Name: MCKENNA, JAMES
Address: 8771 IBIS COVE CIRCLE
City-St-Zip: NAPLES, FL 34119**Title:** VD (X) Change () Addition
Name: OWENS, TIMOTHY
Address: 8692 IBIS COVE CIRCLE
City-St-Zip: NAPLES, FL 34119**Title:** TSD (X) Change () Addition
Name: CHAPMAN, JUDITH
Address: 8744 IBIS COVE CIRCLE
City-St-Zip: NAPLES, FL 34119**Title:** D () Change (X) Addition
Name: BREAKER, ROBERT
Address: 8744 IBIS COVE CIRCLE
City-St-Zip: NAPLES, FL 34119**Title:** D () Change (X) Addition
Name: GABRIEL, JOSEPH
Address: 8167 IBIS COVE CIRCLE
City-St-Zip: NAPLES, FL 34119

I hereby certify that the information supplied with this filing does not qualify for the 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 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: JAMES MCKENNA

PD

04/25/2004

Electronic Signature of Signing Officer or Director

Date