

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N24496

FILED  
Apr 04, 2011  
Secretary of State

**Entity Name:** ISLAND NEIGHBORHOOD HOMEOWNER'S ASSOCIATION, INC.

**Current Principal Place of Business:**

2389 TREASURE ISLE DR  
PALM BCH GARDENS, FL 33410

**New Principal Place of Business:**

**Current Mailing Address:**

7264 WEST OAKLAND PARK BLVD  
LAUDERHILL, FL 33313

**New Mailing Address:**

FEI Number: 65-0054018

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

DICKER, KRIVOK & STOLOFF, PA  
1818 AUSTRALIAN AVENUE SOUTH  
SUITE 400  
WEST PALM BEACH, FL 33409 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: TD  
Name: AMANN, PATRICIA ANN  
Address: 13332 MANGROVE ISLE DR.  
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: VPD  
Name: STROLLA, SCOTT  
Address: 13412 MANGROVE ISLE  
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: PD  
Name: SUMMONTE, CHERYL  
Address: 13348 MANGROVE ISLE  
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: TD  
Name: CATALANO, FRANK  
Address: 13356 MANGROVE ISLE  
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: D  
Name: GLAESNER, CRAIG  
Address: 13388 MANGROVE ISLE  
City-St-Zip: PALM BEACH GARDENS, FL 33410

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: CHERYL SUMONTE

PRES

04/04/2011

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

\_\_\_\_\_  
Date