

2000 UNIFORM BUSINESS REPORT (UBR)

5/31

FILED
Jun 16, 2000 8:00 am
Secretary of State

05-03-2000 90064 009 ****61.25

DOCUMENT # N95000002693 R

1. Entity Name

ISLAND CAY PROPERTY OWNERS ASSOCIATION, INC.

Principal Place of Business 3900 S FLORIDA AVE LAKELAND FL 33813	Mailing Address 3900 S FLORIDA AVE LAKELAND FL 33813-1151
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2. Principal Place of Business Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
City & State	City & State



DO NOT WRITE IN THIS SPACE

Zip	Country	Zip	Country
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4. FEI Number 59-3322602	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent

CORBETT, R. DENNIS
3900 S FLORIDA AVE
LAKELAND FL 33813

7. Name and Address of New Registered Agent

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, 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**

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

**Make Check Payable to
Department of State**

OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

ADDRESS ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
D CORBETT, R. DENNIS 3900 S FLORIDA AVE LAKELAND FL 33813	<input type="checkbox"/>	PRESIDENT DIRECTOR CORBETT, R. DENNIS 420 ISLAND CAY WAY APOLLO BEACH, FL 33572	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
D MILLER, JERRY O 3900 S FLORIDA AVE LAKELAND FL 33813	<input type="checkbox"/>	VICE-PRESIDENT DIRECTOR TERRY SAGES 2106 PRINCESS WAY BRANDON, FL 33511	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
D KINCART, ROBERT O 3900 S FLORIDA AVE LAKELAND FL 33813	<input type="checkbox"/>	SECRETARY/TREASURER DIRECTOR LYNN REID 433 ISLAND CAY WAY APOLLO BEACH, FL 33572	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
	<input type="checkbox"/>		<input type="checkbox"/> Change <input type="checkbox"/> Addition
	<input type="checkbox"/>		<input type="checkbox"/> Change <input type="checkbox"/> Addition
	<input type="checkbox"/>		<input type="checkbox"/> Change <input type="checkbox"/> Addition

CR2037 (9/99)

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: SICORBERT, R. DENNIS PRESIDENT Date: 4-15-2000 Daytime Phone #: 863-648-4848