

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 708600

Entity Name: VINA DEL MAR ISLAND ASSOCIATION INC**Current Principal Place of Business:**221 N. TESSIER DR
SAINT PETE BEACH, FL 33706**Current Mailing Address:**P.O.BOX 67314
SAINT PETE BEACH, FL 33736 US**FEI Number: 59-6209873****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**HACKER, MARY
221 N. TESSIER DRIVE
ST PETERSBURG BEACH, FL 33706 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:**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	P
Name	ZIBRIDA, JEROME M
Address	311 N. TESSIER DR.
City-State-Zip:	ST. PETE BEACH FL 33706

Title	VP
Name	LIVINGSTON, DICK
Address	3115 E VINA
City-State-Zip:	ST. PETE BEACH FL 33706

Title	D
Name	WOMACK, ANNA
Address	2990 ALTON DR
City-State-Zip:	SAINT PETE BEACH FL 33706

Title	SECRETARY
Name	FUSS, SUE
Address	220 N. TESSIER DR
City-State-Zip:	ST PETE BEACH FL 33706

Title	T
Name	HACKER, MARY
Address	221 N TESSIER DR
City-State-Zip:	ST. PETE BEACH FL 33706

Title	D
Name	QUIN, TIM
Address	182 MAR ST
City-State-Zip:	ST. PETE BEACH FL 33706

Title	D
Name	HEIGES, LYN
Address	2940 ALTON DR
City-State-Zip:	ST PETE BEACH FL 33706

Title	CORRESPONDING SECRETARY
Name	ROTHENBERGER, DEB
Address	423 HERMOSITA
City-State-Zip:	ST PETE BEACH FL 33706

Continues on page 2

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: JEROME ZIBRIDA**PRESIDENT****01/17/2013**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	MILMAN, BERYL
Address	2970 ALTON DR
City-State-Zip:	ST PETE BEACH FL 33706