

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 718120

Entity Name: NETTLES ISLAND, INC.**Current Principal Place of Business:**9801 SOUTH OCEAN DR.
JENSEN BCH, FL 34957**Current Mailing Address:**9801 SOUTH OCEAN DR.
JENSEN BCH, FL 34957**FEI Number:** 59-1407317**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**BECKER & POLIAKOFF, P.A.
C/O LANCE CLOUSE, ESQ.
RIVER OAK CENTER 401 SE OSCEOLA STREET 1ST FLOOR
STUART, FL 34994 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 DIRECTOR
Name FISHER, FRANK
Address 9801 S. OCEAN DRIVE
City-State-Zip: JENSEN BEACH FL 34957

Title PRESIDENT
Name BENEDICT, MARSHA
Address 9801 S. OCEAN DRIVE
City-State-Zip: JENSEN BEACH FL 34957

Title T
Name SCHNELL, SHARON
Address 9801 SOUTH OCEAN DR.
City-State-Zip: JENSEN BCH FL 34957

Title VP
Name MAGLIANO, MICHAEL
Address 9801 SOUTH OCEAN DR.
City-State-Zip: JENSEN BCH FL 34957

Title SECRETARY
Name KICKERT, HOWARD
Address 9801 SOUTH OCEAN DR.
City-State-Zip: JENSEN BCH FL 34957

Title DIRECTOR
Name STEVENS, DAVE
Address 9801 SOUTH OCEAN DR.
City-State-Zip: JENSEN BCH FL 34957

Title DIRECTOR
Name WITHERS, TODD
Address 9801 SOUTH OCEAN DR.
City-State-Zip: JENSEN BCH FL 34957

Title DIRECTOR
Name MCLAUGHLIN, JANICE
Address 9801 SOUTH OCEAN DR.
City-State-Zip: JENSEN BCH FL 34957

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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: MARSHA BENEDICT

PRESIDENT

01/21/2015

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	BELLAVANCE, TOM
Address	9801 SOUTH OCEAN DR.
City-State-Zip:	JENSEN BCH FL 34957