Electronic Signature of Signing Officer/Director Detail

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 728599

Entity Name: 700 ISLAND WAY ASSOCIATION, INC.

Current Principal Place of Business:

700 ISLAND WAY CLEARWATER, FL 34630

Current Mailing Address:

FIRSTSERVICE RESIDENTIAL 2870 SCHERER DR NORTH SUITE 100 SAINT PETERSBURG, FL 33716 US

FEI Number: 59-1631204

Name and Address of Current Registered Agent:

ZACUR, RICHARD ESQ. ZACUR & GRAHAM, P.A. **5200 CENTRAL AVENUE** ST PETERSBURG, FL 33733 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

Officer/Director Detail :

Title	Ρ	Title	D
Name	RACHAEL, JAMES	Name	SPAULDING, JUDITH
Address	FIRSTSERVICE RESIDENTIAL 2870 SCHERER DR NORTH SUITE 100	Address	FIRSTSERVICE RESIDENTIAL 2870 SCHERER DR NORTH SUITE 100
City-State-Zip:	SAINT PETERSBURG FL 33716	City-State-Zip:	SAINT PETERSBURG FL 33716
Title	D	Title	VP
Name	LINETSKY, FELIX	Name	SERRA, MIKE
Address	FIRSTSERVICE RESIDENTIAL 2870 SCHERER DR NORTH SUITE 100	Address	FIRSTSERVICE RESIDENTIAL 2870 SCHERER DR NORTH SUITE 100
City-State-Zip:	SAINT PETERSBURG FL 33716	City-State-Zip:	SAINT PETERSBURG FL 33716
Title	т	Title	S
Title Name	T WILLIAMS, HUGH	Title Name	S CARROZA, DORIS
	·		-
Name	WILLIAMS, HUGH FIRSTSERVICE RESIDENTIAL	Name	CARROZA, DORIS FIRSTSERVICE RESIDENTIAL 2870 SCHERER DR NORTH SUITE 100
Name Address	WILLIAMS, HUGH FIRSTSERVICE RESIDENTIAL 2870 SCHERER DR NORTH SUITE 100	Name Address	CARROZA, DORIS FIRSTSERVICE RESIDENTIAL 2870 SCHERER DR NORTH SUITE 100
Name Address City-State-Zip:	WILLIAMS, HUGH FIRSTSERVICE RESIDENTIAL 2870 SCHERER DR NORTH SUITE 100 SAINT PETERSBURG FL 33716	Name Address	CARROZA, DORIS FIRSTSERVICE RESIDENTIAL 2870 SCHERER DR NORTH SUITE 100
Name Address City-State-Zip: Title	WILLIAMS, HUGH FIRSTSERVICE RESIDENTIAL 2870 SCHERER DR NORTH SUITE 100 SAINT PETERSBURG FL 33716 DIRECTOR	Name Address	CARROZA, DORIS FIRSTSERVICE RESIDENTIAL 2870 SCHERER DR NORTH SUITE 100

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: JAMES RACHAEL	PRESIDENT	01/30/2014
Electronic Signature of Signing Officer/Director Detail		Date

FILED Jan 30, 2014 Secretary of State CC5008597743

Date

Certificate of Status Desired: No