

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 735204

Entity Name: THE ISLAND ESTATES YACHT CLUB, INC.**Current Principal Place of Business:**C/O PATRICIA OSTROSKY
85 BELLEVIEW BLVD # 601
BELLEAIR, FL 33756**Current Mailing Address:**C/O PATRICIA OSTROSKY
85 BELLEVIEW BLVD # 601
BELLEAIR, FL 33756 US**FEI Number:** 59-2418802**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**TRAUPMAN, GENE
1670 HERITAGE CT
TARPON SPRINGS, FL 34689 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:** GENE TRAUPMAN

01/30/2020

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	SECRETARY
Name	COXHEAD, MARCIA
Address	685 HARBOR ISLAND
City-State-Zip:	CLEARWATER BEACH FL 33767

Title	DIRECTOR
Name	REINHARDT, MARY
Address	51 ISLAND WAY #1202
City-State-Zip:	CLEARWATER FL 33767

Title	COMMODORE
Name	TRAUPMAN, GENE
Address	1670 HERITAGE OAKS CT
City-State-Zip:	TARPON SPRINGS FL 34689

Title	DIRECTOR
Name	TRAUPMAN, ANGIE
Address	1670 HERITAGE OAKS CT
City-State-Zip:	TARPON SPRINGS FL 34689

Title	DIRECTOR
Name	GUNTHER, EILEEN
Address	3838 MCKAY CREEK DR
City-State-Zip:	LARGO FL 33770

Title	VICE COMMODORE
Name	OSTROSKY, JAMES
Address	85 BELLEVIEW BLVD # 601
City-State-Zip:	BELLEAIR FL 33756

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: GENE TRAUPMAN

COMMODORE

01/30/2020

Electronic Signature of Signing Officer/Director Detail

Date