

**2023 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# N03000003423

**Entity Name:** ISLAND CROWNE CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

1900 N ATLANTIC AVE  
# 104  
DAYTONA BEACH, FL 32118

**Current Mailing Address:**

1900 N ATLANTIC AVE  
# 104  
DAYTONA BEACH, FL 32118

**FEI Number: 74-3120154**

**Certificate of Status Desired: Yes**

**Name and Address of Current Registered Agent:**

THOMPSON, HOPE CAM  
1900 N ATLANTIC AVE  
# 104  
DAYTONA BEACH, FL 32118 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:** HOPE THOMPSON, CAM

09/08/2023

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title           TREASURER  
Name           MCCUE, RUDOLPH J  
Address        1900 NORTH ATLANTIC AVE  
                  UNIT #704  
City-State-Zip: DAYTONA BEACH FL 32118

Title           PRESIDENT  
Name           MCCUE, RUDOLPH J  
Address        1900 NORTH ATLANTIC AVE  
                  UNIT #704  
City-State-Zip: DAYTONA BEACH FL 32118

Title           EVP OF ADMINISTRATION  
Name           DESSAIGNE, JEANNETTE  
Address        1900 N. ATLANTIC AVE.  
                  UNIT #503  
City-State-Zip: DAYTONA BEACH FL 32118

Title           EVP OF OPERATIONS  
Name           HOWARD, DAVISON  
Address        1900 N ATLANTIC AVE  
                  UNIT #1703  
City-State-Zip: DAYTONA BEACH FL 32118

Title           DIRECTOR  
Name           JOHN, HOLBROCK  
Address        1900 N ATLANTIC AVE, UNIT 702  
City-State-Zip: DAYTONA BEACH FL 32118

Title           SECRETARY  
Name           DENISE, JONES  
Address        1900 N ATLANTIC AVE  
                  UNIT # 801  
City-State-Zip: DAYTONA BEACH FL 32118

*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:** DENISE JONES

**SECRETARY**

09/08/2023

Electronic Signature of Signing Officer/Director Detail

Date