## 2015 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N39277

Entity Name: IBIS LAKES HOMEOWNERS ASSOCIATION, INC.

FILED
Jun 09, 2015
Secretary of State
CC9611699382

## **Current Principal Place of Business:**

C/O TALLFIELD ASSOCIATES INC 12765 W. FOREST HILL BLVD. SUITE 1320 WELLINGTON, FL 33414

## **Current Mailing Address:**

C/O TALLFIELD ASSOCIATES P.O. BOX 212995 ROYAL PALM BEACH, FL 33421 US

FEI Number: 65-0211429 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

GARY D FIELDS ESQ. 4400 PGA BLVD. ADMITALTY TOWER SUITE900 PALM BEACH GARDENS, FL 33410 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 P Title VF

Name JACKSON, JEFF Name WANGLER, SHERIDAN

Address C/O TALLFIELD ASSOCIATES Address C/O TALLFIELD ASSOCIATES

P.O. BOX 212995 P.O. BOX 212995

City-State-Zip: ROYAL PALM BEACH FL 33421 City-State-Zip: ROYAL PALM BEACH FL 33421

 Title
 DIRECTOR
 Title
 DIRECTOR

 Name
 PEDERSEN, WILLIAM
 Name
 LEWIS, ARNIE

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Address C/O TALLFIELD ASSOCIATES Address C/O TALLFIELD ASSOCIATES

P.O. BOX 212995 P.O. BOX 212995

City-State-Zip: ROYAL PALM BEACH FL 33421 City-State-Zip: ROYAL PALM BEACH FL 33421

Title DIRECTOR Title DIRECTOR

Name FEINGOLD, DIANE Name SCIANNA, LOU

Address C/O TALLFIELD ASSOCIATES Address C/O TALLFIELD ASSOCIATES

P.O. BOX 212995 P.O. BOX 212995

City-State-Zip: ROYAL PALM BEACH FL 33421 City-State-Zip: ROYAL PALM BEACH FL 33421

Title DIRECTOR

Name BROWN, MARTY

Address C/O TALLFIELD ASSOCIATES

P.O. BOX 212995

City-State-Zip: ROYAL PALM BEACH FL 33421

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: JEFF JACKSON PRESIDENT 06/09/2015

Date