

2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H54419

Entity Name: ISLE OF PALMS MOBILE HOMEOWNERS ASSOCIATION, INC.

FILED
Apr 02, 2015
Secretary of State
CC8315449210

Current Principal Place of Business:

7400 46TH AVENUE NORTH
PARK OFFICE
ST. PETERSBURG, FL 33709

Current Mailing Address:

7400 46TH AVENUE NORTH
PARK OFFICE
ST. PETERSBURG, FL 33709 US

FEI Number: 59-2878419

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SOUTHWAY, HOWARD
7400 46TH AVE N .
LOT 525
ST PETERSBURG, FL 33709 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 P
Name MAXFIELD, VIRGINIA
Address 7400-46TH AVE NO. LOT 157
City-State-Zip: SAINT PETERSBURG FL 33709

Title VP
Name STRAEMAN, DIANNE
Address 7400 46TH AVE NO. LOT 245
City-State-Zip: SAINT PETERSBURG FL 33709

Title S
Name GARBIS, JIM
Address 7400 46TH AVE. NO. LOT 417
City-State-Zip: SAINT PETERSBURG FL 33709

Title T
Name SOUTHWAY, HOWARD
Address 7400 - 46TH AVE. NORTH, LOT 525
City-State-Zip: SAINT PETERSBURG FL 33709

Title D
Name BEAUCHAMP, JOE
Address 7400 46TH AVE. NO LOT 126
City-State-Zip: SAINT PETERSBURG FL 33709

Title D
Name LUCAS, MARGE
Address 7400-46TH AVE NO. LOT 147
City-State-Zip: SAINT PETERSBURG FL 33709

Title DIRECTOR
Name FLEURY, THOMAS
Address 7400 46TH AVE NORTH LOT 421
City-State-Zip: ST. PETERSBURG FL 33709

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: HOWARD SOUTHWAY

TREASURER

04/02/2015

Electronic Signature of Signing Officer/Director Detail

Date