

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 702305

FILED
Jan 07, 2009
Secretary of State

Entity Name: IONA GARDENS CIVIC ASSOCIATION, INC.

Current Principal Place of Business:

15720 FERN DR SW
FT MYERS, FL 33908

New Principal Place of Business:

Current Mailing Address:

15720 FERN DR SW
FT. MYERS, FL 33908 US

New Mailing Address:

12150 LIVE OAK DR
FT. MYERS, FL 33908 US

FEI Number: 59-2222849

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COVERDALE, CHARLES
15640 FERN DRIVE, IONA GARDENS SW
FORT MYERS, FL 33908 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: COVERDALE, CHARLES R
Address: 15640 FERN DRIVE, IONA GARDENS SW
City-St-Zip: FORT MYERS, FL 33908

Title: VP () Delete
Name: WALTER, JAMES
Address: 12110 CYPRESS DRIVE
City-St-Zip: FORT MYERS, FL 33908

Title: T () Delete
Name: MESLER, JEAN
Address: 12150 LIVE OAK DRIVE
City-St-Zip: FORT MYERS, FL 33908

Title: RS () Delete
Name: DONNELLY, CAROL
Address: 15650 FERN DRIVE
City-St-Zip: FORT MYERS, FL 33908

Title: FS () Delete
Name: FRANKHAUSER, LINDA
Address: 12140 MOSS DRIVE
City-St-Zip: FORT MYERS, FL 33908

Title: D () Delete
Name: TURNER DALE,
Address: 12210 CYPRESS DR SW
City-St-Zip: FT. MYERS, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: T (X) Change () Addition
Name: MESLER, DELORIS JEAN
Address: 12150 LIVE OAK DRIVE
City-St-Zip: FORT MYERS, FL 33908

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: DELORIS JEAN MESLER

T

01/07/2009

Electronic Signature of Signing Officer or Director

Date