

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 03, 2006 8:00 am
Secretary of State

07-03-2006 90001 034 ****61.25

DOCUMENT # 703791



1. Entity Name
**PALM BEACH ISLES PROPERTY OWNERS
ASSOCIATION, INC.**

Principal Place of Business
1281 N. OCEAN DR PMB 138
WEST PALM BEACH, FL 33404 US

Mailing Address
1281 N. OCEAN DR PMB 138
WEST PALM BEACH, FL 33404 US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

06062006 Chg-NP CR2E037 (4/06)

4. FEI Number
65-0500408

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**CONTOLE WILLIAM L.
1030 GRAND BAHAMA
RIVIERA BEACH, FL 33404**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by September 6, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE **D** ☒ Delete
NAME **DIVERS, RICKY**
STREET ADDRESS **1131 CORAL WAY**
CITY-ST-ZIP **RIVIERA BEACH, FL 33404**

TITLE **P** ☐ Delete
NAME **CONTOLE, WILLIAM L.**
STREET ADDRESS **1030 GRAND BAHAMA**
CITY-ST-ZIP **RIVIERA BCH., FL**

TITLE **D** ☒ Delete
NAME **BANE, DON**
STREET ADDRESS **1050 GRAND BAHAMA**
CITY-ST-ZIP **RIVIERA BEACH, FL 33404**

TITLE **X D** ☐ Delete
NAME **RITTS, BILL**
STREET ADDRESS **1160 CORAL WAY**
CITY-ST-ZIP **WEST PALM BEACH, FL 33404**

TITLE **D** ☐ Delete
NAME **NEUMANN, DON**
STREET ADDRESS **1090 FAIRVIEW LANE**
CITY-ST-ZIP **WEST PALM BEACH, FL 33404**

TITLE **T** ☐ Delete
NAME **OETZMAN, BARBARA**
STREET ADDRESS **1071 FAIRVIEW LANE**
CITY-ST-ZIP **RIVIERA BEACH, FL 33404**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **VP** ☐ Change ☒ Addition
NAME **DICK HOPMANN**
STREET ADDRESS **1111 GULFSTREAM WAY**
CITY-ST-ZIP **RIVIERA BEACH, FL 33404**

TITLE **D** ☐ Change ☒ Addition
NAME **SHERRY TEMPLE**
STREET ADDRESS **1280 BIMINI LANE**
CITY-ST-ZIP **RIVIERA BEACH FL 33404**

TITLE **S** ☐ Change ☒ Addition
NAME **MARSHA FISHBANE**
STREET ADDRESS **1040 BIMINI LANE**
CITY-ST-ZIP **RIVIERA BEACH FL 33404**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6/29/06
Date

842-9998
Daytime Phone #