

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 712981

FILED
Mar 25, 2010
Secretary of State

Entity Name: CULBREATH ISLES PROPERTY OWNERS ASSOCIATION, INC

Current Principal Place of Business:

4131 GUNN HWY.
TAMPA, FL 33624

New Principal Place of Business:

4131 GUNN HWY.
TAMPA, FL 33618

Current Mailing Address:

4131 GUNN HWY.
TAMPA, FL 33624

New Mailing Address:

4131 GUNN HWY.
TAMPA, FL 33618

FEI Number: 59-1382856

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FRISCIA, FRANCIS E
MEIROSE & FRISCIA, P.A.
5550 W EXECUTIVE DR, STE 250
TAMPA, FL 33609 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: D
Name: HARDIN, JOHN
Address: 4131 GUNN HWY
City-St-Zip: TAMPA, FL 33618

Title: PD
Name: CHIBANI, SAADE
Address: 4131 GUNN HWY
City-St-Zip: TAMPA, FL 33618

Title: D
Name: ADAMS, CHERYL
Address: 4131 GUNN HWY
City-St-Zip: TAMPA, FL 33618

Title: S
Name: CUSAK, JIM
Address: 4131 GUNN HWY
City-St-Zip: TAMPA, FL 33618

Title: VPD
Name: HULSE, RON
Address: 4131 GUNN HWY
City-St-Zip: TAMPA, FL 33618

Title: TD
Name: WALKER, KEN
Address: 4131 GUNN HWY
City-St-Zip: TAMPA, FL 33618

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: SAADE CHIBANI

PD

03/25/2010

Electronic Signature of Signing Officer or Director

Date