

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 12, 2006 8:00 am
Secretary of State

04-12-2006 90072 050 ****61.25

DOCUMENT # 713757

1. Entity Name
VILLA TAMBOUR OF IBIS ISLE ASSOCIATION, INC.



Principal Place of Business
**2190 IBIS ISLE RD.
PALM BEACH, FL 33480**

Mailing Address
**2216 IBIS ISLE RD
PALM BEACH, FL 33480**

40096000



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

02132006 Chg-NP CR2E037 (11/05)

4. FEI Number
59-1286936

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

~~C.A.M.~~
~~314 NE 3RD STREET~~
~~BOYNTON BEACH, FL 33435~~

Name **GAMS PLUS**
Street Address (P.O. Box Number is Not Acceptable)
4524 Gun Club Road
Suite 105
City **West Palm Beach** FL Zip Code **33415**

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

Kimberly Foose **Kimberly Foose, president** **4/7/06**
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 May 1, 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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD ☒ Delete
NAME KOGON, BEVERLIE
STREET ADDRESS 2190 IBIS ISLE RD UNIT #3
CITY-ST-ZIP PALM BEACH, FL 33480

TITLE PD ☐ Change ☒ Addition
NAME MILLARD, FRANK
STREET ADDRESS 2190 IBIS ISLE, UNIT 4
CITY-ST-ZIP PALM BEACH, FL 33480

TITLE VTD ☐ Delete
NAME CONRAD, MARK
STREET ADDRESS 2190 IBIS ISLE RD UNIT #2
CITY-ST-ZIP PALM BEACH, FL 33480

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

TITLE SD ☒ Delete
NAME MILLARD, SUZANNE
STREET ADDRESS 2190 IBIS ISLE RD, UNIT 4
CITY-ST-ZIP PALM BEACH, FL 33480

TITLE SD ☐ Change ☒ Addition
NAME KLAPPER, ELLEN
STREET ADDRESS 2190 IBIS ISLE RD, UNIT 2
CITY-ST-ZIP PALM BEACH, FL 33480

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
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:

Mark Conrad **MARK CONRAD, VTD**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/28/06
Date

561-758-5288
Daytime Phone #