

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 715606

FILED
Feb 07, 2011
Secretary of State

Entity Name: ENGLEWOOD ISLES I ASSOCIATION, INC.

Current Principal Place of Business:

18-A OAKWOOD DRIVE NORTH
ENGLEWOOD, FL 34223

New Principal Place of Business:

Current Mailing Address:

1811 ENGLEWOOD ROAD, #215
ENGLEWOOD, FL 34223

New Mailing Address:

FEI Number: 59-1507155

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SEABREEZE CAM, LLC
245 WHITE MARSH LANE
ROTONDA WEST, FL 33947 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: CORCORAN, DIANNE
Address: 5 OAKWOOD DR N
City-St-Zip: ENGLEWOOD, FL 34223

Title: VP
Name: MORGAN, TED
Address: 1191 PORTERVILLE RD.
City-St-Zip: EAST AURORA, NY 14052

Title: P
Name: SHOCK, DAVID B
Address: 14 OAKWOOD DRIVE NORTH
City-St-Zip: ENGLEWOOD, FL 34223

Title: D
Name: WATKINS, JAMES
Address: 15 OAKWOOD DRIVE NORTH
City-St-Zip: ENGLEWOOD, FL 34223

Title: S/T
Name: BOOTH, MIKE
Address: 42 OAKWOOD DR N
City-St-Zip: ENGLEWOOD, FL 34223

Title: D
Name: SHIMKUS, MIKE
Address: 40 OAKWOOD DR N
City-St-Zip: ENGLEWOOD, FL 34223

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: DAVID SHOCK

P

02/07/2011

Electronic Signature of Signing Officer or Director

Date