

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 05, 2005 8:00 am
Secretary of State

05-05-2005 90100 021 ****61.25

DOCUMENT # 718120

1. Entity Name
NETTLES ISLAND, INC.



Principal Place of Business
**9801 SOUTH OCEAN DR.
JENSEN BCH, FL 34957**

Mailing Address
**9801 SOUTH OCEAN DR.
JENSEN BCH, FL 34957**

50048930



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

01052005 Chg-NP CR2E037 (10/03)

City & State

City & State

4. FEI Number
59-1407317

Applied For
Not Applicable

Zip

Country

Zip

Country

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

**CORNETT, JANE L
401 E. OSCEOLA ST. RIVER OAK CENTER
STUART, FL 34994**

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 May 1, 2005**

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
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
PEABODY, ESTHER
270 NETTLES BLVD
JENSEN BEACH, FL 34957** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**P John Miller
86 Nettles Blvd.
Jensen Beach, Fl. 34957** ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**P
SELBY, KENNETH
641 NETTLES BLVD
JENSEN BEACH, FL 34957** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VP George R. Voigt
265 Nettles Blvd.
Jensen Beach, Fl. 34957** ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
ATTANASIO, JOHN
816 NETTLES BCH BLVD
JENSEN BEACH, FL 34957** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**S Donald DeWinter
503 Nettles Blvd.
Jensen Beach, Fl. 34957** ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VP
MILLER, JOHN
86 NETTLES BLVD
JENSEN BEACH, FL 34957** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**T John Attanasio
449 Nettles Blvd.
Jensen Beach, Fl. 34957** ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**S
DE WINTER, DONALD
503 NETTLES BLVD
JENSEN BEACH, FL 34957** ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**T
LEDoux, PAUL
9145 NETTLES BLVD
JENSEN BEACH, FL 34957** ☒ Delete

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

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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

Date

Daytime Phone #