

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 726705

FILED  
Apr 06, 2012  
Secretary of State

**Entity Name:** ISLAND HOUSE OF CRESCENT BEACH, INC.

**Current Principal Place of Business:**

5650 A1A S.  
F-115  
ST AUGUSTINE, FL 32080

**New Principal Place of Business:**

**Current Mailing Address:**

5650 A1A S.  
F-115  
ST AUGUSTINE, FL 32080 US

**New Mailing Address:**

**FEI Number:** 59-1569788

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

VANDERMEER, DONALD P  
5650 A1A SO.  
UNIT 115  
ST AUGUSTINE, FL 32080 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: SMITH, GENE  
Address: 5650 A1A SOUTH UNIT 226  
City-St-Zip: ST AUGUSTINE, FL 32080

Title: S  
Name: NEILSON, CYNTHIA  
Address: 5650 A1A S UNIT 220  
City-St-Zip: SAINT AUGUSTINE, FL 32080

Title: P  
Name: RESNICK, MIKE  
Address: 5650 HIGHWAY A1A SOUTH UNIT 240  
City-St-Zip: SAINT AUGUSTINE, FL 32080

Title: VP  
Name: MILLER, GARY  
Address: 5650 A1A SOUTH UNIT 204  
City-St-Zip: SAINT AUGUSTINE, FL 32080

Title: D  
Name: POITEVENT, JOHN  
Address: 5650 A1A SOUTH UNIT 202  
City-St-Zip: SAINT AUGUSTINE, FL 32080

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: DON VANDERMEER

RA

04/06/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date