

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Jul 19, 2006
Secretary of State**

DOCUMENT# 735211

Entity Name: HUTCHINSON ISLAND CLUB CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

10410 S. OCEAN DRIVE
JENSEN BEACH, FL 34957

New Principal Place of Business:

Current Mailing Address:

10410 S. OCEAN DRIVE
JENSEN BEACH, FL 34957

New Mailing Address:

FEI Number: 59-1803807 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

CORNETT, JANE L.
401 EAST OSCEOLA STREET
STUART, FL 34994 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: PD () Delete
Name: STAMILE, PETER
Address: 10410 S OCEAN DR., #909
City-St-Zip: JENSEN BEACH, FL 34957

Title: V () Delete
Name: BECK, JERRY
Address: 10410 S OCEAN DR., #903
City-St-Zip: JENSEN BEACH, FL 34957

Title: D () Delete
Name: CRISTIANO, PATRICK
Address: 10410 S OCEAN DR., #607
City-St-Zip: JENSEN BEACH, FL 34957

Title: D (X) Delete
Name: ALVAREZ, WILLIAM
Address: 10410 S OCEAN DR., #504
City-St-Zip: JENSEN BEACH, FL 34957

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: CAPOLONGO, NEIL
Address: 10410 S OCEAN DR., 1004
City-St-Zip: JENSEN BEACH, FL 34957

Title: V/S (X) Change () Addition
Name: MCCORMACK, JOHN
Address: 10410 S OCEAN DR., #508
City-St-Zip: JENSEN BEACH, FL 34957

Title: D (X) Change () Addition
Name: LASALANDRA, JOHN
Address: 10410 S OCEAN DR., #801
City-St-Zip: JENSEN BEACH, FL 34957

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: NEIL CAPOLONGO

P

07/19/2006

Electronic Signature of Signing Officer or Director

Date