

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 735322

FILED
Apr 01, 2011
Secretary of State

Entity Name: LIGHTHOUSE POINT ASSOCIATION, INC.

Current Principal Place of Business:

200 PERIWINKLE WAY
SANIBEL, FL 33957

New Principal Place of Business:

C/O ISLAND MANAGEMENT
711 TARPON BAY ROAD
SANIBEL, FL 33957 US

Current Mailing Address:

PO BOX 100
SANIBEL, FL 33957

New Mailing Address:

C/O ISLAND MANAGEMENT
PO BOX 100
SANIBEL, FL 33957 US

FEI Number: 59-1855705

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MACKESY, STEVEN
711 TARPON BAY RD
SANIBEL, FL 33957 US

Name and Address of New Registered Agent:

MACKESY, STEVEN
C/O ISLAND MANAGEMENT
711 TARPON BAY ROAD
SANIBEL, FL 33957 US

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: STEVEN MACKESY

04/01/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: SD
Name: LITOFISKY, BARRY
Address: 200 PERIWINKLE WAY, 116A
City-St-Zip: SANIBEL, FL 33957

Title: VD
Name: GASTEYER, TED
Address: 4641 WEST 98TH STREET
City-St-Zip: OAK LAWN, IL 60453

Title: TD
Name: MANION, GORDON
Address: 200 PERIWINKLE WAY #214A
City-St-Zip: SANIBEL, FL 33957

Title: PD
Name: MCGARRY, ROBERT
Address: 423 HOPE STREET UNIT E
City-St-Zip: BRISTOL, RI 02809

Title: D
Name: METZ, STEEN
Address: 20 TRAFALGAR SQ UNIT 205
City-St-Zip: LINCOLNSHIRE, IL 60069

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: ROBERT MCGARRY

PD

04/01/2011

Electronic Signature of Signing Officer or Director

Date