2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 20, 2009
Secretary of State

DOCUMENT# 745751

Entity Name: ISLA DEL CAPRI ADULT CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

11655 3RD ST E
TREASURE ISLAND, FL 33706 US

New Principal Place of Business:

Current Mailing Address:

250 104TH AVE
TREASURE ISLAND, FL 33706 US

New Mailing Address:

FEI Number: 59-1941148 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LAMONT, SUE
250 104TH AVE
TREASURE ISLAND, FL 33706 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: STD ( ) Delete
Name: PULIS, LENA ABELA
Address: 5 KENNTH AVE, # 205
City-St-Zip: N YORK, ONTARIO, CANADA, M2N 6M7

Title: D ( ) Delete
Name: IGLEHEART, JEANNIE
Address: 1135 PASADENA AVE
City-St-Zip: SAINT PETERSBURG, FL 33707

Title: VPD ( ) Delete
Name: GRAMLICH, FRED
Address: 11655 3RD ST. E.
City-St-Zip: TREASURE ISLAND, FL 33706

Title: PD ( ) Delete
Name: BOUSADA, SAMUAL
Address: 11655 3RD ST. E. #16
City-St-Zip: TREASURE ISLAND, FL 33706

Title: D ( ) Delete
Name: GOTTSCHALL, DAVID
Address: 11655 3RD ST E, # 7
City-St-Zip: TREASURE ISLAND, FL 33706

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change ( ) Addition
Name: IGLEHEART, JEANNIE
Address: 1135 PASADENA AVE STE. 327B
City-St-Zip: SAINT PETERSBURG, FL 33707

Title: P (X) Change ( ) Addition
Name: SHEA, ANDREW
Address: 11655 3RD ST. E. #9
City-St-Zip: TREASURE ISLAND, FL 33706

Title: D (X) Change ( ) Addition
Name: SCANLON, CATHERINE
Address: 2207 CHARLEMAGNE CIRCLE
City-St-Zip: PITTSBURGH, PA 15237

Title: D (X) Change ( ) Addition
Name: BAGLEY, VINCE
Address: 11655 3RD ST E, # 3
City-St-Zip: TREASURE ISLAND, FL 33706

I hereby certify that the information supplied with this filing does not qualify 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: LENA ABELA PULIS ST 03/20/2009

Electronic Signature of Signing Officer or Director — Date