

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 745751

FILED
Mar 12, 2010
Secretary of State

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:

LAMONT, SUE
250 104TH AVE
TREASURE ISLAND, FL 33706 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: SUE LAMONT

03/12/2010

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: ST
Name: PULIS, LENA ABELA
Address: 5 KENNTH AVE, # 205
City-St-Zip: N YORK,, ON M2N 6M7 CN

Title: P
Name: IGLEHEART, JEANNIE
Address: 1135 PASADENA AVE STE. 327B
City-St-Zip: SAINT PETERSBURG, FL 33707

Title: VP
Name: SHEA, ANDREW
Address: 11655 3RD ST. E. #9
City-St-Zip: TREASURE ISLAND, FL 33706

Title: D
Name: ALLEN, CHERYL
Address: 11655 3RD STREET E. #14
City-St-Zip: TREASURE ISLAND, FL 33706

Title: D
Name: BOUSADA, SAMUAL
Address: 12255 4TH STREET E.
City-St-Zip: TREASURE ISLAND, FL 33706

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: JEANNE IGLEHEART

P

03/12/2010

Electronic Signature of Signing Officer or Director

Date