

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 747276

FILED
Mar 13, 2008
Secretary of State

Entity Name: FLAMINGO ISLAND PROPERTY OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

846 COPA D ORO
MARATHON, FL 330501212 US

New Principal Place of Business:

Current Mailing Address:

P O BOX 501212
MARATHON, FL 330501212 US

New Mailing Address:

FEI Number: 65-0198482

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

REISS, SUSAN A
846 COPA D ORO
MARATHON, FL 33050 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: REISS, SUSAN A
Address: 846 COPA D ORO
City-St-Zip: MARATHON, FL 33050

Title: D () Delete
Name: CONDAS, LOUIS
Address: 848 COPA D ORO
City-St-Zip: MARATHON, FL 33050

Title: DV () Delete
Name: EDWARD, SCHUSTER M JR.
Address: 977 OCOTILLO LANE
City-St-Zip: MARATHON, FL 33050

Title: D () Delete
Name: COCHRAN, STUART
Address: 856 COP D ORO
City-St-Zip: MARATHON, FL 33050

Title: PD () Delete
Name: KEN, LUCHT
Address: 706 COPA D ORO
City-St-Zip: MARATHON, FL 33050

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

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: SUSAN A REISS

STD

03/13/2008

Electronic Signature of Signing Officer or Director

Date