

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 749892

FILED  
Jun 22, 2009  
Secretary of State

**Entity Name:** THE ISLANDER CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

17006 GULF BLVD  
N. REDINGTON BEACH, FL 33708

**New Principal Place of Business:**

**Current Mailing Address:**

17006 GULF BLVD  
N. REDINGTON BEACH, FL 33708

**New Mailing Address:**

**FEI Number:** 59-2585750 **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:**

JONES, CHRISTIE  
2964 KENIWICK DR. S  
CLEARWATER, FL 337613316 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: STRICKLER, DALE H  
Address: 5139 CHAMELEON COURT  
City-St-Zip: SPRINGHILL, FL 346074404

Title: D ( ) Delete  
Name: JEFFORDS, JOSEPH D III  
Address: 6021 APPECROSS STREET, NORTH  
City-St-Zip: SAINT PETERSBURG, FL 337091465

Title: TD ( ) Delete  
Name: WILLIAMS, ESTHER  
Address: 8501 141ST STREET, NORTH  
City-St-Zip: SEMINOLE, FL 33542

Title: D ( ) Delete  
Name: ROFFLER, BERNICE  
Address: 149 WATERWAY AVENUE  
City-St-Zip: SATSUMA, FL 32189

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**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: D (X) Change ( ) Addition  
Name: BASS, JAMES  
Address: 2217 BOGAERT  
City-St-Zip: DOVER, FL 33527

Title: D ( ) Change (X) Addition  
Name: KAZAR, JENNIFER  
Address: 8767 BRIDLEWOOD WAY, N  
City-St-Zip: SEMINOLE, FL 33777

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: DALE H STRICKLER

PRES

06/22/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date