

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 753788

FILED
Apr 09, 2009
Secretary of State

Entity Name: THE ISLAND CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

2180 WEST SR 434, SUITE 5000
LONGWOOD, FL 327795044

New Principal Place of Business:

Current Mailing Address:

2180 WEST SR 434, SUITE 5000
LONGWOOD, FL 327795044

New Mailing Address:

FEI Number: 59-1449915

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HART, JAMES W JR
SENTRY MANAGEMENT INC
2180 W SR 434 STE 5000
LONGWOOD, FL 32779 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: VPD (X) Delete
Name: COHEN, DAVID
Address: 2145 MICHELE DRIVE
City-St-Zip: SARASOTA, FL 34231

Title: TD () Delete
Name: POLIVCHAK, RODGER
Address: 5246 MAGNOLIA POND DR
City-St-Zip: SARASOTA, FL 34233

Title: D () Delete
Name: RANDOLPH, ARVIL
Address: 5318 MONTCLAIR PL
City-St-Zip: SARASOTA, FL 34231

Title: PD () Delete
Name: FORWARD, STANLEY
Address: 2137 MICHELE DR
City-St-Zip: SARASOTA, FL 34231

Title: SD () Delete
Name: TURNER, ROMY
Address: 5334 MONTCLAIR PL
City-St-Zip: SARASOTA, FL 34231

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: VPD (X) Change () Addition
Name: RANDOLPH, ARVIL
Address: 5318 MONTCLAIR PL
City-St-Zip: SARASOTA, FL 34231

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

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

Title: D () Change (X) Addition
Name: HARTIG, DENNIS
Address: 5350 MONTCLAIR PL
City-St-Zip: SARASOTA, FL 34231

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: STANLEY FORWARD

PD

04/09/2009

Electronic Signature of Signing Officer or Director

Date