

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 757194

FILED  
Jan 22, 2009  
Secretary of State

Entity Name: ISLANDIA II CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

9500 S. OCEAN DRIVE  
JENSEN BCH, FL 34957

**New Principal Place of Business:**

**Current Mailing Address:**

9500 S. OCEAN DRIVE  
JENSEN BCH, FL 34957

**New Mailing Address:**

FEI Number: 59-2286555

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

JARZYNIECKI, JERRY  
9500 S. OCEAN DRIVE  
JENSEN BEACH, FL 34957 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: D ( ) Delete  
Name: AARONSON, PETER  
Address: 9500 S. OCEAN DR. #1903  
City-St-Zip: JENSEN BEACH, FL 34957

Title: D ( ) Delete  
Name: JARZYNIECKI, JERRY  
Address: 9500 S OCEAN DR # 1909  
City-St-Zip: JENSEN BEACH, FL 34957

Title: VP ( ) Delete  
Name: EWALD, ED  
Address: 9500 S. OCEAN DR. #1909  
City-St-Zip: JENSEN BCH, FL 34957

Title: P ( ) Delete  
Name: HUNT, CLAUDE  
Address: 9500 S OCEAN DR # 1401  
City-St-Zip: JENSEN BEACH, FL 34957

Title: S ( ) Delete  
Name: HUESTER, WANDA  
Address: 9500 S OCEAN DR #2004  
City-St-Zip: JENSEN BEACH, FL 34957

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: VP (X) Change ( ) Addition  
Name: AARONSON, PETER  
Address: 9500 S. OCEAN DR. #1903  
City-St-Zip: JENSEN BEACH, FL 34957

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

Title: D (X) Change ( ) Addition  
Name: CIMINO, SIL  
Address: 9500 S. OCEAN DR. #1403  
City-St-Zip: JENSEN BCH, FL 34957

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: JERRY JARZYNIECKI

D

01/22/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date