

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 770484

FILED
Apr 15, 2009
Secretary of State

Entity Name: ISLAND BEACH CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

8280 COLLEGE PKWY
#103
FORT MYERS, FL 33919 US

New Principal Place of Business:

Current Mailing Address:

8280 COLLEGE PKWY
#103
FORT MYERS, FL 33919 US

New Mailing Address:

FEI Number: 59-2614398 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CONRAD, DEBBIE
C/O PARAGON FINANCIAL SERVICES
8280 COLLEGE PKWY #103
FORT MYERS, FL 33919 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: BYERS, PHILIP
Address: 4001 WOODCASTLE RD
City-St-Zip: EVANSVILLE, IN 47711

Title: PD () Delete
Name: LANDISI, RON
Address: 392 ESTERO BLVD, # 605
City-St-Zip: FT. MYERS BEACH, FL 33931

Title: TD () Delete
Name: NUNN, ROBERT
Address: 4315 STRINGTON ROAD
City-St-Zip: EVANSVILLE, IN 47711

Title: SD () Delete
Name: ROHRBACHER, MICHAEL
Address: 8990 BURR OAK ROAD
City-St-Zip: ROSCOE, IL 61073

Title: VD () Delete
Name: GERMAN, MARTIN
Address: 394 ESTERO BLVD, # 503
City-St-Zip: FORT MYERS BEACH, FL 33931

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: D (X) Change () Addition
Name: BORNEMAN, DAVID
Address: 392 ESTERO BLVD, # 102
City-St-Zip: FORT MYERS BEACH, FL 33931

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: ROBERT NUNN

TD

04/15/2009

Electronic Signature of Signing Officer or Director

Date