

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G61802

FILED
Jan 07, 2008
Secretary of State

Entity Name: CARIBBEAN ISLES HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

12100 SEMINOLE BLVD., #52
LARGO, FL 33778

New Principal Place of Business:

Current Mailing Address:

12100 SEMINOLE BLVD., #52
LARGO, FL 33778

New Mailing Address:

FEI Number: 59-2429220

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JOSEPH, JUSTIN G
1266 SOUTH PINELLAS AVE
TARPOON SPRINGS, FL 34689 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: PESTA, ROBERT
Address: 12100 SEMINOLE BLVD LOT 342
City-St-Zip: LARGO, FL 33778

Title: T () Delete
Name: DUDLEY, LEO
Address: 12100 SEMINOLE BLVD LOT 10
City-St-Zip: LARGO, FL 33778

Title: D () Delete
Name: BOUGHTON, FRED
Address: 12100 SEMINOLE BLVD LOT 47
City-St-Zip: LARGO, FL 33778

Title: D () Delete
Name: MYERS, BOB
Address: 12100 SEMINOLE BLVD LOT 10
City-St-Zip: LARGO, FL 33778

Title: D () Delete
Name: DE VOE, JEAN
Address: 12100 SEMINOLE BLVD LOT 291
City-St-Zip: LARGO, FL 33778

Title: D () Delete
Name: STANISZEWSKI, FRAN
Address: 1200 SEMINOLE BLVD LOT 197
City-St-Zip: LARGO, FL 33778

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:

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LEO DUDLEY

T

01/07/2008

Electronic Signature of Signing Officer or Director

Date