

**NOT-FOR-PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**May 06, 2002 8:00 am**  
**Secretary of State**

05-06-2002 90137 033 \*\*\*\*61.25

DOCUMENT # N01000001361

1. Entity Name

ISLAND PLACE CONDOMINIUM ASSOCIATION, INC.

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business

600 Island Place Way

Suite, Apt. #, etc.

3. Mailing Address

10033 Ninth Street North

Suite, Apt. #, etc.  
2nd Floor

DO NOT WRITE IN THIS SPACE

City & State  
Tampa, FL

City & State  
St. Petersburg, FL

4. FEI Number  
65-1085485

Applied For  
Not Applicable

Zip  
33602

Country  
USA

Zip  
33716

Country  
USA

5. Certificate of Status Desired  \$8.75 Additional Fee Required

**DO NOT WRITE  
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name

Rampart Properties, Inc.

Street Address (P.O. Box Number is Not Acceptable)

10033 Ninth Street North, 2nd Fl

City

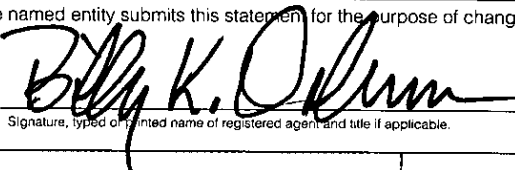
St. Petersburg,

FL

Zip Code  
33716

8. 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



Billy K. Osburn, President

4/25/02

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FEE IS \$61.25  
Initial or Amended UBR**

9. Election Campaign Financing  
Trust Fund Contribution.

**\$5.00** May Be  
Added to Fees

**Make Check Payable to  
Department of State**

10. OFFICERS AND DIRECTORS

|  |  |
|--|--|
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | PD<br>Michael Horner<br>10033 Ninth Street North<br>St. Petersburg, FL 33716   |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | STD<br>David A. Finlay<br>10033 Ninth Street North<br>St. Petersburg, FL 33716 |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | D<br>Shay Mayron<br>10033 Ninth Street North<br>St. Petersburg, FL 33716       |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |  |
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**DO NOT WRITE  
IN THIS SPACE**

CR2E037B (12/01)

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or on an attachment with an address, with all other like empowered.

SIGNATURE:

