

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01594

FILED
May 27, 2009
Secretary of State

Entity Name: IBIS POINT HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

666 NE DIXIE HWY.
JENSEN BEACH, FL 34957 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 111
JENSEN BEACH, FL 34958 US

New Mailing Address:

FEI Number: 59-2495509 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

BONAN, ELIZABETH P ESQ
759 S FEDERAL HWY STE 212
STUART, FL 34994 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: VD () Delete
Name: HAASE, RICHARD
Address: 3422 SW BOBALINK WAY
City-St-Zip: PALM CITY, FL 34990

Title: PD () Delete
Name: CHRISTENSEN, RONALD
Address: 2579 SW BUBALINK CT.
City-St-Zip: PALM CITY, FL 34994

Title: D () Delete
Name: BELTON, JEAN
Address: 3242 SW BOBALINK WAY
City-St-Zip: PALM CITY, FL 34990

Title: STD () Delete
Name: NOLAN, LORRIE
Address: 2589 SW BODALICK CT
City-St-Zip: PALM CITY, FL 34990

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VD (X) Change () Addition
Name: HAASE, RICHARD
Address: 3422 SW BOBALINK WAY
City-St-Zip: PALM CITY, FL 34990 US

Title: PD (X) Change () Addition
Name: CHRISTENSEN, RONALD
Address: 2579 SW BUBALINK CT.
City-St-Zip: PALM CITY, FL 34994 US

Title: D (X) Change () Addition
Name: BELTON, JEAN
Address: 3242 SW BOBALINK WAY
City-St-Zip: PALM CITY, FL 34990 US

Title: STD (X) Change () Addition
Name: NOLAN, LORRIE
Address: 2589 SW BODALICK CT
City-St-Zip: PALM CITY, FL 34990 US

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: RONALD CHRISTENSEN

PD

05/27/2009

Electronic Signature of Signing Officer or Director

Date