

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01805

FILED  
Mar 13, 2012  
Secretary of State

**Entity Name:** EMERALD ISLE CONDOMINIUM ASSOCIATION OF NORTH REDINGTON BEACH, INC.

**Current Principal Place of Business:**

17334 GULF BOULEVARD  
NORTH REDINGTON BEACH, FL 33708

**New Principal Place of Business:**

**Current Mailing Address:**

901 N HERCULES AVENUE  
SUITE A  
CLEARWATER, FL 33765

**New Mailing Address:**

**FEI Number:** 58-1557971      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

COMMONS, RICHARD C  
901 N HERCULES AVENUE SUITE A  
CLEARWATER, FL 33765 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: P  
Name: BASSETT, JOHN  
Address: 1689 APPLE VALLEY DRIVE  
City-St-Zip: WAUCONDA, IL 60084

Title: S  
Name: REBBER, STANLEY  
Address: P.O. BOX 607  
City-St-Zip: KOKOMO, IN 46901

Title: VP  
Name: BASSETT, WILLIAM  
Address: 212 E. LINCOLN ROAD  
City-St-Zip: KOKOMO, IN 46902

Title: T  
Name: O'DONNELL, JOHN  
Address: 782 EAST COUNTY ROAD 450 N  
City-St-Zip: KOKOMO, IN 46901

Title: DIR  
Name: TURNER, ELMER  
Address: 17334 GULF BLVD., #503  
City-St-Zip: N. REDINGTON BEACH, FL 33708

I hereby 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 all other like empowered.

SIGNATURE: RICHARD COMMONS

CPA

03/13/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date