

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 15, 2007 8:00 am**  
**Secretary of State**

03-15-2007 90025 006 \*\*\*\*90.00

**DOCUMENT # N06000004523**

1. Entity Name  
ISLAND IN THE SUN CO-OP, INC.



Principal Place of Business  
100 HAMPTON RD  
CLEARWATER, FL 33579

Mailing Address  
100 HAMPTON RD  
CLEARWATER, FL 33579



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

02032007 Chg-NP CR2E037 (12/06)

City & State

City & State

4. FEI Number  
**20-4759502**

Applied For  
Not Applicable

Zip

Country

Zip

Country

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

POZGAY, MARTIN T  
ONE TREASURE LN  
TREASUTE ISLAND, FL 33706

Name **Todd Newby**  
Street Address (P.O. Box Number is Not Acceptable)  
**100 Hampton Rd. - Clubhouse**  
City **Clearwater** FL **33759**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

*[Signature]*

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

(NOTE: Registered Agent signature required when reinstating)

**3/9/07**

DATE

**Filing Fee is \$61.25  
Due by May 1, 2007**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

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

**Make check payable to  
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP SHOOP, KEN 100 HAMPTON RD CLEARWATER, FL 33579	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV NEWMAN, BOB 100 HAMPTON RD CLEARWATER, FL 33579	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS MATTHEWS, GAIL 100 HAMPTON RD CLEARWATER, FL 33579	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT JACKSON, DEBBIE 100 HAMPTON RD CLEARWATER, FL 33579	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CLEVELAND, WAYNE 100 HAMPTON RD CLEARWATER, FL 33579	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ROBINSON, KAY 100 HAMPTON RD CLEARWATER, FL 33579	<input checked="" type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP Newman, Robert 100 Hampton Rd. Clearwater, FL 33759	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV Zaffuto Jr., Vincent G 100 Hamrton Rd. Clearwater, FL 33759	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Nauheimér, Roger E 100 Hamrton Rd. Clearwater, FL 33759	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Ferwick, Arlene 100 Hamrton Rd. Clearwater, FL 33759	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** *Robert Newman* Robert Newman - President

**3/7/2007**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #