# 2011 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

**FILED**
**Oct 18, 2011**
**Secretary of State**

DOCUMENT# N08023

**Entity Name:** ISLAND VISTA ESTATES HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

3000 NORTH TAMIAMI TRAIL
N. FT. MYERS, FL 33903

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 4479
N. FT. MYERS, FL 33918

**New Mailing Address:**

**FEI Number: 65-0036386** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

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

JOHNSON, ANN M
201 ELAND DR
N. FT. MYERS, FL 33917 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: REEBY, ROBERT M P
Address: 448 BUFFALO WAY
City-St-Zip: N FORT MYERS, FL 33917

Title: VP
Name: BOOSKA, JANET VP
Address: 545 ZEBRA DR
City-St-Zip: N. FT. MYERS, FL 33917

Title: SEC
Name: COFFEE, ADAKINNE
Address: 207 ELAND DR
City-St-Zip: N FORT MYERS, FL 33917

Title: DIR
Name: SMITH, GORDON
Address: 303 BUFFALO WAY
City-St-Zip: N. FT. MYERS, FL 33917

Title: DIR
Name: GROUT, CINDY
Address: 622 ELEPHANT WAY
City-St-Zip: N. FT. MYERS, FL 33917

Title: DIR
Name: TUCKER, MARIE
Address: 414 MONGOOSE DR
City-St-Zip: N. FT. MYERS, FL 33917

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: ANN M JOHNSON TREA 10/18/2011
Electronic Signature of Signing Officer or Director Date