2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 02, 2009
Secretary of State

DOCUMENT# N10989

Entity Name: ISLAND PARK WOODLANDS HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

17508 BOAT CLUB DR
FORT MYERS, FL 33908

New Principal Place of Business:

Current Mailing Address:

17508 BOAT CLUB DR
FORT MYERS, FL 33908

New Mailing Address:

FEI Number: 59-2616551 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WRIGHT, WILLIAM J
17508 BOAT CLUB DR
FORT MYERS, FL 33908 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:	T	( ) Delete
Name:	WRIGHT, WILLIAM J	
Address:	17508 BOAT CLUB DR	
City-St-Zip:	FT. MYERS, FL 33908	
Title:	P	( ) Delete
Name:	MCCORD, JAMES	
Address:	17598 BOAT CLUB DR	
City-St-Zip:	FORT MYERS, FL 33908	
Title:	D	( ) Delete
Name:	ANKLAM, CONRAD	
Address:	17500 BOAT CLUB DR	
City-St-Zip:	FORT MYERS, FL 33908	
Title:	D	( ) Delete
Name:	CONLEY, MATT	
Address:	17588 BOAT CLUB DR	
City-St-Zip:	FORT MYERS, FL 33908	
Title:	S	( ) Delete
Name:	GREEN, CAMILLA	
Address:	17569 MOORFIELD DR	
City-St-Zip:	FORT MYERS, FL 33908	
Title:	D	( ) Delete
Name:	THORSTRAD, STEVE	
Address:	6043 MACBETH LN	
City-St-Zip:	FORT MYERS, FL 33908	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	VP	(X) Change ( ) Addition
Name:	ANKLAM, CONRAD	
Address:	17500 BOAT CLUB DR	
City-St-Zip:	FORT MYERS, FL 33908	
Title:	S	(X) Change ( ) Addition
Name:	GREEN, CAMILLA	
Address:	17569 MOORFIELD DR	
City-St-Zip:	FORT MYERS, FL 33908	
Title:	D	(X) Change ( ) Addition
Name:	CONLEY, MATT	
Address:	17588 BOAT CLUB DR	
City-St-Zip:	FORT MYERS, FL 33908	
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		

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: WILLIAM J. WRIGHT T 02/02/2009
Electronic Signature of Signing Officer or Director — Date