

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 02, 2008 8:00 am
Secretary of State

05-02-2008 90119 027 ****61.25

DOCUMENT # N21102

1. Entity Name

610 ISLAND WAY CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business

JIM NOBLES MANAGER
251 WINDWARD PASS F
CLEARWATER BEACH FL 33767
US

Mailing Address

JIM NOBLES MANAGER
251 WINDWARD PASS F
CLEARWATER BEACH FL 33767
US



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

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/07)

4. FEI Number

59-2880696

Applied For

Not Applicable

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

NICHOLS, SHERON
251 WINDWARD PASS F
CLEARWATER BEACH FL 33767

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2008

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

TITLE TD ☐ Delete
NAME BRUCE, CHRIS
STREET ADDRESS 610 ISLAND WAY # 505
CITY-ST-ZIP CLEARWATER FL 33767

TITLE D ☒ Delete
NAME STYPLE, KEN
STREET ADDRESS 610 ISLAND WAY #504
CITY-ST-ZIP CLEARWATER FL 33-767c

TITLE PD ☐ Delete
NAME HALLIGAN, SHARON
STREET ADDRESS 610 ISLAND WAY # 408
CITY-ST-ZIP CLEARWATER BEACH FL 33767

TITLE SD ☐ Delete
NAME KNOOP, MARGARET
STREET ADDRESS 610 ISLAND WAY SUITE 105
CITY-ST-ZIP CLEARWATER FL 33767

TITLE VPD ☐ Delete
NAME KASEWICZ, TED
STREET ADDRESS 610 ISLAND WAY SUITE 401
CITY-ST-ZIP CLEARWATER FL 33767

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE D ☒ Change ☐ Addition
NAME Chris Bruce
STREET ADDRESS 610 Island Way #505
CITY-ST-ZIP Clearwater, FL 33767

TITLE DVP ☐ Change ☒ Addition
NAME Debbie Hartman
STREET ADDRESS 610 Island Way #301
CITY-ST-ZIP Clearwater, FL 33767

TITLE TD ☒ Change ☐ Addition
NAME Sharon Halligan
STREET ADDRESS 610 Island Way #408
CITY-ST-ZIP Clearwater, FL 33767

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE PD ☒ Change ☐ Addition
NAME Ted Kasewicz
STREET ADDRESS 610 Island Way #401
CITY-ST-ZIP Clearwater, FL 33767

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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:

Debbie Hartman

(DEBBIE HARTMAN)

4/17/08