

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N21102

FILED
Mar 18, 2010
Secretary of State

Entity Name: 610 ISLAND WAY CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

JIM NOBLES MANAGEMENT, INC.
251 WINDWARD PASS, SUITE F
CLEARWATER, FL 33767 US

New Principal Place of Business:

Current Mailing Address:

JIM NOBLES MANAGEMENT, INC.
251 WINDWARD PASS, SUITE F
CLEARWATER, FL 33767 US

New Mailing Address:

FEI Number: 59-2880696

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JIM NOBLES MANAGEMENT, INC.
251 WINDWARD PASS, SUITE F
CLEARWATER, FL 33767 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: PD
Name: HARTMAN, DEBRA
Address: 610 ISLAND WAY # 301
City-St-Zip: CLEARWATER, FL 33767 US

Title: VPD
Name: KNOOP, MARGARET
Address: 610 ISLAND WAY # 105
City-St-Zip: CLEARWATER, FL 33767 US

Title: TSD
Name: BRUCE, CHRIS
Address: 610 ISLAND WAY SUITE 505
City-St-Zip: CLEARWATER, FL 33767 US

Title: D
Name: STYPLE, KENNETH
Address: 610 ISLAND WAY #504
City-St-Zip: CLEARWATER, FL 33767 US

Title: D
Name: KASEWICZ, TED
Address: 610 ISLAND WAY #401
City-St-Zip: CLEARWATER, FL 33767 US

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: DEBRA HARTMAN

PD

03/18/2010

Electronic Signature of Signing Officer or Director

Date