

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N22755

FILED  
Apr 02, 2009  
Secretary of State

Entity Name: EAST HIGH POINT/ISLAND ROAD ASSOCIATION, INC.

**Current Principal Place of Business:**

23 ISLAND RD.  
STUART, FL 34996

**New Principal Place of Business:**

17 ISLAND ROAD  
STUART, FL 34996

**Current Mailing Address:**

17 ISLAND RD.  
STUART, FL 34996

**New Mailing Address:**

17 ISLAND ROAD  
STUART, FL 34996

FEI Number: 65-0033759

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

PANTON, JO ELLEN  
17 ISLAND RD  
STUART, FL 34996 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: D ( ) Delete  
Name: MARTIN, GEORGIANN  
Address: 23 ISLAND RD.  
City-St-Zip: STUART, FL

Title: VP ( ) Delete  
Name: MAJEWSKI, TED  
Address: 24 EAST HIGHT POINT  
City-St-Zip: STUART, FL 34996

Title: ST ( ) Delete  
Name: PANTON, ELLEN J  
Address: 17 BLAND RD.  
City-St-Zip: STUART, FL 34996

Title: D ( ) Delete  
Name: MISER, SCOTT  
Address: 21 ISLAND RD  
City-St-Zip: STUART, FL 34996

Title: D ( ) Delete  
Name: MILDENBERGER, JOHN  
Address: 8 EAST HIGH POINT RD  
City-St-Zip: STUART, FL 34996

Title: D ( ) Delete  
Name: COTTON, STEPHANN  
Address: 11 ISLAND RD  
City-St-Zip: STUART, FL 34996

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ST (X) Change ( ) Addition  
Name: PANTON, ELLEN J  
Address: 17 ISLAND ROAD  
City-St-Zip: STUART, FL 34996

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: JO ELLEN PANTON

ST

04/02/2009

Electronic Signature of Signing Officer or Director

Date