

DOCUMENT # N23372

1. Entity Name

ISLAND TREEHOUSE ASSOCIATION, INC.

FILED

Jan 08, 2001 8:00 am  
Secretary of State

01-08-2001 90066 014 \*\*\*\*61.25

Principal Place of Business

Mailing Address

C/O WM. J. FITZGERALD  
2936 GULF OF MEXICO DR.  
LONGBOAT KEY FL 34228  
USC/O WM. J. FITZGERALD  
2936 GULF OF MEXICO DR.  
LONGBOAT KEY FL 34228  
US

2. Principal Place of Business

2934 Gulf of Mexico Drive

3. Mailing Address

2934 Gulf of Mexico Drive

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Unit D

Unit D

City &amp; State

City &amp; State

Longboat Key

Longboat Key

Zip

Country

Zip

Country

FL 34228

U.S.

FL 34228

U.S.

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

FITZGERALD, WILLIAM  
2936 GULF OF MEXICO DRIVE  
LONGBOAT KEY FL 34228

Name MORRISON, DEREK

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

2934 Gulf of Mexico Drive

City LONGBOAT KEY

FL

Zip Code 34228

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

4<sup>th</sup> January 2001FILE NOW:  
FEE IS \$61.259. Election Campaign Financing  
Trust Fund Contribution. ☐\$5.00 May Be  
Added to FeesMake Check Payable to  
Department of State

10. OFFICERS AND DIRECTORS

TITLE VD ☒ Delete  
NAME BARNARD, JAMES  
STREET ADDRESS 2932 GULF OF MEXICO DR  
CITY-ST-ZIP LONGBOAT KEY FLTITLE PD ☒ Delete  
NAME FEDA, ANTHONY  
STREET ADDRESS 2930 GULF OF MEXICO DR  
CITY-ST-ZIP LONGBOAT KEY FLTITLE VD ☒ Delete  
NAME FITZGERALD, WILLIAM  
STREET ADDRESS 2936 GULF OF MEXICO DRIVE  
CITY-ST-ZIP LONGBOAT KEY FLTITLE ST ☒ Delete  
NAME FITZGERALD, LORRAINE M  
STREET ADDRESS 2936 GULF OF MEXICO DRIVE  
CITY-ST-ZIP LONGBOAT KEY FLTITLE D ☒ Delete  
NAME MCKEOWN, FREDERICK  
STREET ADDRESS 2934 GULF OF MEXICO DRIVE  
CITY-ST-ZIP LONGBOAT KEY FLTITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE VP/ST/D ☒ Change ☐ Addition  
NAME WEBB-MORRISON, JULIE  
STREET ADDRESS 2934 GULF OF MEXICO DRIVE  
CITY-ST-ZIP LONGBOAT KEY, FL 34228TITLE P-D ☒ Change ☐ Addition  
NAME MORRISON, DEREK  
STREET ADDRESS 2934 GULF OF MEXICO DRIVE  
CITY-ST-ZIP LONGBOAT KEY, FL 34228TITLE D ☒ Change ☐ Addition  
NAME HAYWORTH, JAMES  
STREET ADDRESS 2929 GULF OF MEXICO DRIVE  
CITY-ST-ZIP LONGBOAT KEY, FL 34228TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:

SIGNATURE REQUIRED  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR4<sup>th</sup> January 2001

Date

383-5972

Daytime Phone #

CR2E037 (10/00)

00750