

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N25730

**FILED**  
**Mar 21, 2011**  
**Secretary of State**

**Entity Name:** THE KINZIE ISLAND HOMEOWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

503 E GULF  
SANIBEL, FL 33957 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 308  
FORT MYERS, FL 33902

**New Mailing Address:**

2340 PERIWINKLE WAY L1  
SANIBEL, FL 33957

**FEI Number:** 65-0081488

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SHIELDS, CHRISTOPHER J  
1833 HENDRY STREET  
FORT MYERS, FL 33901 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: P  
Name: KING, JEROME  
Address: 589 KINZIE ISLAND CT.  
City-St-Zip: SANIBEL, FL 33957

Title: SD  
Name: TZANIS, PAT  
Address: 584 KINZIE ISLAND CT  
City-St-Zip: SANIBEL, FL 33957

Title: VP  
Name: BOWERS, HANK  
Address: 626 KINZIE ISLAND CT  
City-St-Zip: SANIBEL, FL 33957

Title: TD  
Name: EDWARDS, DOUGLAS  
Address: 542 KINZIE ISL CT  
City-St-Zip: SANIBEL, FL 33957

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: JEROME KING

PD

03/21/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date