## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N27885

FILED Apr 02, 2008 Secretary of State

Entity Name: ISLAND PARK VILLAGE SECTION V, PART I, CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** 2180 WEST SR 434, SUITE 5000 2180 WEST SR 434 LONGWOOD, FL 327795044 US SUITE 5000 LONGWOOD, FL 327795044 US **Current Mailing Address:** New Mailing Address: 2180 WEST SR 434, SUITE 5000 2180 WEST SR 434 LONGWOOD, FL 327795044 US SUITE 5000 LONGWOOD, FL 327795044 US FEI Number: 65-0356443 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of New Registered Agent: Name and Address of Current Registered Agent: HART, JAMES W JR HART, JAMES W JR 2180 WEST SR 434, SUITE 5000 SENTRY MANAGEMENT INC LONGWOOD, FL 327795044 US 2180 WEST SR 434 SUITE 5000 LONGWOOD, FL 327795044 US 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: JAMES W HART JR 04/02/2008 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: STD () Delete () Change () Addition MULFORD, GAIL Name: Name: 6711 SEA ISLE DRIVE Address: Address: City-St-Zip: FORT MYERS, FL 33908 City-St-Zip: Title: PD () Delete Title: () Change () Addition MELDNER, VOLKER Name: Name: Address: 6701 SEA ISLE DR Address: City-St-Zip: FORT MYERS, FL 33908 City-St-Zip: Title: VPD () Delete Title: () Change () Addition VELAZQUEZ, KAELA Name: Name: Address: 6733 SEA ISLE DR Address: City-St-Zip: FORT MYERS, FL 33908 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: VOLKER MELDNER PD 04/02/2008