

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 01, 2006 8:00 am
Secretary of State

05-01-2006 90317 015 ****61.25

DOCUMENT # N28806

1. Entity Name

ISLAND ESCAPE CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business

325 ISLAND WAY
BOX 11
CLEARWATER FL 33767
US

Mailing Address

325 ISLAND WAY
BOX 11
CLEARWATER FL 33767
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #

C/O SEABOARD ARBORS
MANAGEMENT SERVICES, INC
2189 CLEVELAND ST STE 225
CLEARWATER, FL 33765

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C/O SEABOARD ARBORS
MANAGEMENT SERVICES, INC
2189 CLEVELAND ST STE 225
CLEARWATER, FL 33765

City & State

Zip

C

Zi

1st MOORE

CR2E037 (10/05)

4. FEI Number

59-2956487

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

LEIGHTON, LENNARD A
2189 CLEVELAND STREET
STE 225
CLEARWATER BEACH FL 33767

Name

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

City

CLEARWATER, FL 33765

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8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, and accepts the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2006

9. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE PD ☐ Delete
NAME SHEPARD, WESLEY
STREET ADDRESS 325 ISLAND WAY #101
CITY-ST-ZIP CLEARWATER FL 33767

TITLE STD ☐ Delete
NAME ANDERSEN, STEVE
STREET ADDRESS 325 ISLAND WAY UNIT 105
CITY-ST-ZIP CLEARWATER BEACH FL 33767

TITLE VD ☒ Delete
NAME BINGLEY, LEO
STREET ADDRESS 325 ISLAND WAY #110
CITY-ST-ZIP CLEARWATER FL 33767

TITLE D ☐ Delete
NAME SMINK, CAROL
STREET ADDRESS 325 ISLAND WAY #108
CITY-ST-ZIP CLEARWATER BEACH FL 33767

TITLE D ☐ Delete
NAME ORLOWSKI, DAVID
STREET ADDRESS 325 ISLAND WAY #102
CITY-ST-ZIP CLEARWATER BEACH FL 33767

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONAL OFFICERS AND DIRECTORS IN 10

TITLE D ☐ Change ☒ Addition
NAME JANSEN, ALEX
STREET ADDRESS 325 ISLAND WAY #109
CITY-ST-ZIP CLEARWATER BEACH FL 33767

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE VPD ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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:

W. Shepard

4/12/06

727-466-0571