

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N29240

**FILED**  
**Jan 08, 2010**  
**Secretary of State**

**Entity Name:** ISLAND VIEW HOMEOWNER'S ASSOCIATION, INC.

**Current Principal Place of Business:**

625 NE 19TH AVENUE  
DEERFIELD BEACH, FL 33441

**New Principal Place of Business:**

**Current Mailing Address:**

633 NE 19TH AVENUE  
DEERFIELD BEACH, FL 33441

**New Mailing Address:**

**FEI Number:** 65-0232146

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ASHLEMAN, DENISE  
633 NE 19TH AVENUE  
DEERFIELD BEACH, FL 33441 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:** PD  
**Name:** DIMARTINO, KENNETH L.  
**Address:** 633 NE 19TH AVE.  
**City-St-Zip:** DEERFIELD BEACH, FL 33441

**Title:** SD  
**Name:** MAUS, DANIEL  
**Address:** 639 NE 19TH AVENUE  
**City-St-Zip:** DEERFIELD BEACH, FL 33441

**Title:** TD  
**Name:** ASHLEMAN, DENISE  
**Address:** 633 NE 19TH AVE.  
**City-St-Zip:** DEERFIELD BEACH, FL 33441

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:** KENNETH L. DIMARTINO

PD

01/08/2010

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

\_\_\_\_\_  
Date