

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N29311

FILED
Apr 02, 2008
Secretary of State

Entity Name: ISLAND PARK VILLAGE SECTION V, PART 2, CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

2180 WEST STATE ROAD 434
SUITE 5000
LONGWOOD, FL 327795044 US

New Principal Place of Business:

Current Mailing Address:

2180 WEST STATE ROAD 434
SUITE 5000
LONGWOOD, FL 327795044 US

New Mailing Address:

FEI Number: 65-0092242

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HART, JAMES W JR
% SENTRY MANAGEMENT INC.
2180 W SR 434, STE 5000
LONGWOOD, FL 327795044 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: VPD () Delete
Name: BARKER, JOSEPH
Address: 17641 CAPTIVA ISLAND LN
City-St-Zip: FORT MYERS, FL 33908

Title: D () Delete
Name: CROUT, DANIEL
Address: 17651 MARCO ISLAND LN
City-St-Zip: FORT MYERS, FL 33908

Title: PD () Delete
Name: SCHUETT, CATHY
Address: 17485 MEADOW LAKE CIR
City-St-Zip: FORT MYERS, FL 33967

Title: D () Delete
Name: MORAN, JEAN
Address: 17633 CAPTIVA ISLAND LANE
City-St-Zip: FORT MYERS, FL 33908

Title: STD () Delete
Name: BARKER, CONNIE
Address: 17641 CAPTIVA ISLAND LN
City-St-Zip: FT MYERS, FL 33908

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: BARKER, JOSEPH
Address: 17641 CAPTIVA ISLAND LN
City-St-Zip: FORT MYERS, FL 33908

Title: D (X) Change () Addition
Name: FINKLER, JOHN
Address: 17611 MARCO ISLAND LN
City-St-Zip: FORT MYERS, FL 33908

Title: D (X) Change () Addition
Name: NOENNIG, JACK
Address: 17601 CAPTIVA ISLAND LN
City-St-Zip: FORT MYERS, FL 33908

Title: D (X) Change () Addition
Name: GARDINER, TERRY
Address: 17610 CAPTIVA ISLAND LANE
City-St-Zip: FORT MYERS, FL 33908

Title: () Change () Addition
Name:
Address:
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: JOSEPH BARKER

PD

04/02/2008

Electronic Signature of Signing Officer or Director

Date