

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 05, 2006 8:00 am
Secretary of State

04-05-2006 90137 029 ****61.25

DOCUMENT # N29938



1. Entity Name
ISLAND IN THE GROVE HOMEOWNERS' ASSOCIATION, INC.

Principal Place of Business
**6421 CONGRESS AVE STE 110
BOCA RATON, FL 33487 US**

Mailing Address
**6421 CONGRESS AVE STE 110
BOCA RATON, FL 33487 US**

4004351



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

02132006 Chg-NP CR2E037 (11/05)

4. FEI Number
65-0102798

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

**ISLAND IN THE GROVE HOA, INC.
6421 CONGRESS AVE
SUITE 110
BOCA RATON, FL 33487**

Name

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

City

FL

Zip Code

8. 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. I am familiar with, and accept 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

**Filing 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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD ☐ Delete
NAME ABEND, RON
STREET ADDRESS 7081 MALLORCA CRESCENT
CITY-ST-ZIP BOCA RATON, FL 33433

TITLE ☐ Change ☒ Addition
NAME **D FRED SHERMAN**
STREET ADDRESS **7051 DUBOINET**
CITY-ST-ZIP **BOCA RATON, FL 33433**

TITLE VPD ☒ Delete
NAME SUTTE, DONALD
STREET ADDRESS 7140 MALLORCA CRESCENT
CITY-ST-ZIP BOCA RATON, FL 33433

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

TITLE 2VP ☐ Delete
NAME KAY, CHESTER
STREET ADDRESS 7191 ISLE GROVE PLACE
CITY-ST-ZIP BOCA RATON, FL 33433

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

TITLE SD ☐ Delete
NAME FORTUNATO, JOAN
STREET ADDRESS 7011 ISLE GROVE PLACE
CITY-ST-ZIP BOCA RATON, FL 33433

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

TITLE TD ☐ Delete
NAME SUKEL, ARTHUR
STREET ADDRESS 7071 MALLORCA CRESCENT
CITY-ST-ZIP BOCA RATON, FL 33433

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

TITLE D ☐ Delete
NAME GILLMAN, ROBERT
STREET ADDRESS 7001 ISLE GROVE PLACE
CITY-ST-ZIP BOCA RATON, FL 33433

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 Chapter 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #