

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 10, 2005 8:00 am
Secretary of State

03-10-2005 90128 043 ****61.25

DOCUMENT # N32301					
1. Entity Name ISLAND COUNTRY ESTATES HOMEOWNERS ASSOCIATION, INC.					
Principal Place of Business ISLAND COUNTRY ESTATES P.O. BOX 7923 JUPITER, FL 33458 US			Mailing Address ISLAND COUNTRY ESTATES P.O. BOX 7923 JUPITER, FL 33468-7923 US		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
				Country	
4. FEI Number 65-0122264				Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent WRIST, PETER E 7778 SE COUNTRY ESTATES WAY JUPITER, FL 33458			7. Name and Address of New Registered Agent 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 _____ DATE _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)					
Filing Fee is \$61.25 Due by May 1, 2005		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 NAME STREET ADDRESS CITY-ST-ZIP	PD CURINGTON, NORMAN 18909 SE RED APPLE WAY JUPITER, FL 334581045	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	BMD, TREASURER PAUL, ALICE 18956 SE RED APPLE LANE JUPITER, FL 33458
				☐ Change ☒ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	BMD LEROSE, FRANK 7985 SE COUNTRY ESTATES WAY JUPITER, FL 33458	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
				☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SDVP WRIST, PETER E 7778 SE COUNTRY ESTATS WAY JUPITER, FL 33458	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
				☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	BMD KEYES, RICHARD 7986 SE COUNTRY ESTATES WAY JUPITER, FL 33458	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
				☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
				☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
				☐ Change ☐ Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: <u>Alice Paul</u>				<u>2/28/05</u> <u>561-743-1029</u>	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR				Date Daytime Phone #	