

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N37243

FILED
Apr 17, 2009
Secretary of State

Entity Name: THE ISLAND AT SOUTHPOINTE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

C/O R & P PROPERTY MANAGEMENT
265 AIRPORT RD S
NAPLES, FL 34104 US

New Principal Place of Business:

Current Mailing Address:

C/O R & P PROPERTY MANAGEMENT
265 AIRPORT RD S
NAPLES, FL 34104 US

New Mailing Address:

FEI Number: 65-0186261

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

R&P PROPERTY MANAGEMENT
265 AIRPORT RD S
NAPLES, FL 34104 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 () Delete
Name: GOBEL, NAN
Address: 1540 GULFSTAR DR S
City-St-Zip: NAPLES, FL 34113

Title: VPD () Delete
Name: WARD, NANCY
Address: 1360 GULFSTAR DR S
City-St-Zip: NAPLES, FL 34113

Title: STD () Delete
Name: MOYLE, TOMMIE LOU
Address: 1565 GULFSTAR DR S
City-St-Zip: NAPLES, FL 34113

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VPD (X) Change () Addition
Name: WARD, GEORGE
Address: 1360 GULFSTAR DR S
City-St-Zip: NAPLES, FL 34113

Title: STD (X) Change () Addition
Name: HEMMINGS, RICHARD
Address: 1877 ADMIRAL COURT
City-St-Zip: GLENVIEW, IL 60026

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: NAN GOBEL

PD

04/17/2009

Electronic Signature of Signing Officer or Director

Date