

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N38334

FILED
Feb 10, 2009
Secretary of State

Entity Name: ISLAND INDUSTRIAL PARK ASSOCIATION, INC.

Current Principal Place of Business:

994 N. BARFIELD DRIVE, UNIT #7
MARCO ISLAND, FL 34145 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 1201
MARCO ISLAND, FL 341461201 US

New Mailing Address:

FEI Number: 65-0254852

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CHUTE, JAMES W
994 N. BARFIELD DRIVE
UNIT 7
MARCO ISLAND, FL 34145 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: PHILLIPS, THOMAS
Address: 994 N BARFIELD DR #10
City-St-Zip: MARCO ISLAND, FL 34145

Title: VP () Delete
Name: SCOTT, STEIN
Address: 994 N BARFIELD DR #13
City-St-Zip: MARCO ISLAND, FL 34145

Title: T () Delete
Name: MARINO, KEN
Address: 430 SANDHILL
City-St-Zip: MARCO ISLAND, FL 34145

Title: DR () Delete
Name: PINTO, TONY
Address: 498 PERSIAN CT
City-St-Zip: MARCO ISLAND, FL 34145

Title: DR () Delete
Name: GREGG, MANN
Address: 984 N. GARFIELD DR #16
City-St-Zip: MARCO ISLAND, FL 34145

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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: THOMAS PHILLIPS

PD

02/10/2009

Electronic Signature of Signing Officer or Director

Date