NONPROFIT CORPORATION -ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

FILED Apr 09, 1999 8:00 am Secretary of State

04-09-1999 90083 027 ****61.25

DOCUMENT # N39275

1. Corporation Name

IBIS PROPERTY OWNERS ASSOCIATION, INC.

Principal Place of Business

Mailing Address

9055 IBIS BLVD

9065 IBIS BLVD

SUITE 1100

WEST PALM BEACH FL 33412



US US								
	lace of Business	2a. Mailing Address			3. Date Incorporated or Qualifed 07/27/1990		-	
21	# ***	Suite, Apt. #, etc.		-	4. FEI Number		A	plied For
Suite, Apt.	#, etc.	H ' '			65-0211424			ot Applicable
22		27 			00 0E11424			Additional ==
23	0	28			5. Certificate of Status Desired		Fee R	equired
Zip	Country	Zip	Country	/	6. Election Campaign Financing		•	May Be
24	25	293	0		Trust Fund Contribution			to Fees
	9. Name and Address of Curren	t Registered Agent		, _	10. Name and Address of New R	tegistered A	gent	
			81	Name				
ERDMAN, PATRICIA A				Street Addr	ress (P.O. Box Number is Not Acceptable)			
9055 IBIS BLVD								
-STE-1100	→		83					
WEST PA	LM BEACH FL 33412	•	84	City			85 Zip	Code
	·			<u>L.</u>	oration submits this statement for the	<u> FL</u>		
office or r agent. I a	egistered agent, or both, in the State on familiar with, and accept the obliga				on's board of directors. I hereby accep	ot the appoint	tment as re	egistered
SIGNATURE	Signature, typed or printed name of registered ager	nt and title if applicable. (NOTE: Re	<u> </u>	nt signature require		DATE		
12.	OFFICERS AN	D DIRECTORS	13.		ADDITIONS/CHANGES TO OF	FICERS AND		
TITLE	DP	☐ DELETE	1.1 TITLE			•	Change	Addition
NAME	KITSON, SYD		1.2 NAME	`		,		
STREET ADDRESS			1.3 STREE	T ADDRESS	•			
CITY-ST-ZIP	W. PALM BEACH FL		1.4 CITY-5	Į.				
TITLE	DVP	☐ DELETE	2.1 TITLE				Change	Addition
NAME	WILSON, CLIFFORD G.	_	2.2 NAME					
			•	T ADDRESS				
STREET ADDRESS			2.4 CITY-					
CITY-ST-ZIP.	The state of the s		3.1 TITLE	31-21			Change	Addition
TITLE	SD SPONAN PATRICIA A		3.2 NAME					_
NAME	EDRMAN, PATRICIA A		1	T + DDOFFE				
STREET ADDRESS	1 4444 12.0 22.0			TADDRESS				
CITY-ST-ZIP	W. PALM BEACH FL		3.4. CITY-	ST-ZIP	<u></u>		☐ Change	Additio
TITLE	π	☐ DELETE	4.1 TITLE				<u>Г</u> Гскинув	
NAME	SPEER, GEORGE		4.2 NAME					
STREET ADDRESS	9055 IBIS BLVD		4.3 STREE	TADDRESS				
CITY-ST-ZIP	W PALM BEACH FL 33412		4.4 CITY-5	ST-ZIP		,		
TITLE .		☐ DELETE	5.1 TITLE		•		Change	Additio
NAME	1		5.2 NAME					
STREET ADDRESS	·	•	5.3 STREE	TADDRESS				
CITY-ST-ZIP			5.4 CITY-8	ST-ZIP				
TILE		☐ DELETE	6.1 TITLE				Change	Additio
			6.2 NAME				-	
NAME	¥		1	TADORESS				
STREET ADDRESS								
CITY-ST-ZIP	<u> </u>		6.4 CITY-S	SI-ZIP				

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 informatic indicated on this annual report or supplemental annual 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 exposition or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 or changed, or on an attachment with an appears, with all other like empowered.