

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N39275

FILED
Apr 02, 2009
Secretary of State

Entity Name: IBIS PROPERTY OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

8005 SANDHILL WAY EAST
WEST PALM BEACH, FL 33412 US

New Principal Place of Business:

Current Mailing Address:

8005 SANDHILL WAY EAST
WEST PALM BEACH, FL 33412 US

New Mailing Address:

FEI Number: 65-0211424 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

GELFAND, MICHAEL J
REGIONS FINANCIAL TOWER, SUITE 1220
1555 PALM BEACH LAKES BLVD.
WEST PALM BEACH, FL 334012329 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: DP () Delete
Name: LOGIUDICE, STEPHEN
Address: 8225 IBIS BLVD
City-St-Zip: WEST PALM BEACH, FL 33412 US

Title: DVP () Delete
Name: ERDMAN, PATRICIA A
Address: 8005 SANDHILL WAY EAST
City-St-Zip: WEST PALM BEACH, FL 33412 US

Title: TD () Delete
Name: BRAZ, DARCI
Address: 8850 IBIS BLVD
City-St-Zip: WEST PALM BEACH, FL 33412

Title: D () Delete
Name: LEPPERT, ROBERTA
Address: 8005 SANDHILL WAY EAST
City-St-Zip: WEST PALM BEACH, FL 33412

Title: D () Delete
Name: SILVER, STEVE
Address: 8005 SANDHILL WAY E
City-St-Zip: WEST PALM BEACH, FL 33412

Title: D () Delete
Name: CHASKIN, JAY
Address: 8005 SANDHILL WAY E
City-St-Zip: WEST PALM BEACH, FL 33412

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: TD (X) Change () Addition
Name: BALSAMO, FRANK
Address: 8850 IBIS BLVD
City-St-Zip: WEST PALM BEACH, FL 33412

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: PATRICIA A. ERDMAN

VP

04/02/2009

Electronic Signature of Signing Officer or Director

Date