## 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N93000000427

Entity Name: ISLAND PINES RECREATIONAL ASSOCIATION, INC.

FILED Apr 06, 2004 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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2180 W SR 434 **SUITE 5000** 

LONGWOOD, FL 327795044 US

**New Mailing Address: Current Mailing Address:** 

2180 W. STATE ROAD 434 SUITE 5000

LONGWOOD, FL 327795044 US

FEI Number: 65-1013110 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

HART, JAMES W JR SENTRY MANAGEMENT INC 2180 W SR 434 STE 5000 LONGWOOD, FL 32779 US

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:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

22772 ISLAND PINES WAY #213

FORT MYERS BEACH, FL 33931

JOHNSON, LAVERNE

(X) Change ( ) Addition

(X) Change ( ) Addition

() Delete REBES, LARRY Name: Name: 22652 ISLAND PINES WAY Address: Address: City-St-Zip: FORT MYERS BEACH, FL 33931 City-St-Zip:

Title: ( ) Delete Title: JOHNSON, LAVERNE Name: CONWAY, RICHARD Name: Address: 22772 ISLAND PINES WAY Address: 5930 TAYLORSVILLE RD City-St-Zip: FORT MYERS BEACH, FL 33931 City-St-Zip: DAYTON, OH 45424

Title: () Delete Title: SD (X) Change ( ) Addition SHEARER, NANCY SHEARER, NANCY Name: Name:

22724 ISLAND PINES WAY, #402 Address: Address: 132 LA RAY DR City-St-Zip: FORT MYERS BEACH, FL 33931 City-St-Zip: **BUTLER, PA 16001** 

Title: () Delete Title: TD (X) Change ( ) Addition

CONWAY, RICHARD Name: Name: ALLEN, ARTHUR 5930 TAYLORSVILLE RD. Address: Address: 208 SKYLAKE City-St-Zip: DAYTON, OH 45424 City-St-Zip: SAYTEE, GA 30571

Title: () Delete Title: (X) Change ( ) Addition

ALLEN, ARTHUR H KARDA, BILL Name: Name:

6691 ESTERO BLVD., #503 22676 ISLAND PINES WAY Address: Address: City-St-Zip: FORT MYERS BEACH, FL 33931 City-St-Zip: FORT MYERS BEACH, FL 33931

I hereby certify that the information supplied with this filing does not qualify for the 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 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: LAVERNE JOHNSON PD 04/06/2004