

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000000427

FILED
Mar 24, 2006
Secretary of State

Entity Name: ISLAND PINES RECREATIONAL ASSOCIATION, INC.

Current Principal Place of Business:

2180 W SR 434
SUITE 5000
LONGWOOD, FL 327795044 US

New Principal Place of Business:

Current Mailing Address:

2180 W. STATE ROAD 434
SUITE 5000
LONGWOOD, FL 327795044 US

New Mailing Address:

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

Name and Address of Current Registered Agent:

HART, JAMES W JR
SENTRY MANAGEMENT INC
2180 W SR 434 STE 5000
LONGWOOD, FL 32779 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: JOHNSON, LAVERNE
Address: 22772 ISLAND PINES WAY #213
City-St-Zip: FORT MYERS BEACH, FL 33931

Title: VPD () Delete
Name: CIARAMITA, PETER
Address: 6661 ESTERO BLVD #102
City-St-Zip: ESTERO, FL 33931

Title: SD () Delete
Name: SHEARER, NANCY
Address: 132 LA RAY DR
City-St-Zip: BUTLER, PA 16001

Title: TD () Delete
Name: ALLEN, ARTHUR
Address: 208 SKYLAKE
City-St-Zip: SAYTEE, GA 30571

Title: D () Delete
Name: KARDA, BILL
Address: 22676 ISLAND PINES WAY
City-St-Zip: FORT MYERS BEACH, FL 33931

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VPD (X) Change () Addition
Name: WARBURTON, ROBERT
Address: 22748 ISLAND PINES WAY #502
City-St-Zip: FORT MYERS BEACH, FL 33931

Title: D (X) Change () Addition
Name: CIARAMITA, PETER
Address: 6661 ESTERO BLVD #102
City-St-Zip: ESTERO, FL 33931

Title: SD (X) Change () Addition
Name: HECKMAN, JOYCE
Address: 22796 ISLAND PINES WAY
City-St-Zip: FT MYERS BEACH, FL 33931

Title: D (X) Change () Addition
Name: SCHIMPF, ROBERT
Address: PO BOX 108
City-St-Zip: FORT MYERS, FL 33931

Title: PD (X) Change () Addition
Name: KARDA, BILL
Address: 22676 ISLAND PINES WAY
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 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: BILL KARDA

PD

03/24/2006

Electronic Signature of Signing Officer or Director

_____ Date