

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000001501

FILED  
Apr 27, 2005  
Secretary of State

**Entity Name:** THE ISLANDS OF CHARLESTON SHORES AT LAKE CHARLESTON ASSOCIATION, INC.

**Current Principal Place of Business:**

2328 S. CONGRESS AVE.  
SUITE 1C  
WEST PALM BEACH, FL 33406

**New Principal Place of Business:**

**Current Mailing Address:**

2328 S. CONGRESS AVE.  
SUITE 1C  
WEST PALM BEACH, FL 33406

**New Mailing Address:**

**FEI Number:** 65-0526717

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HILLEY, V. DONALD P.A.  
860 US HIGHWAY ONE  
SUITE 108  
NORTH PALM BEACH, FL 33408 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: SD ( ) Delete  
Name: ROSENTHAL, DAVID  
Address: 6861 TERCH KEY ST  
City-St-Zip: LAKE WORTH, FL 33467

Title: VD ( ) Delete  
Name: VITERI, TEODORO  
Address: 7132 CRAW KEY WAY  
City-St-Zip: LAKE WORTH, FL 33467

Title: D ( ) Delete  
Name: BATTAGLIA, JACK  
Address: 6830 TORCH KEY ST  
City-St-Zip: LAKE WORTH, FL 33467

Title: D ( ) Delete  
Name: SAMPSON, TRACY  
Address: 6843 TERCH KEY ST  
City-St-Zip: LAKE WORTH, FL 33467

Title: PD ( ) Delete  
Name: BELENSON, JOAN  
Address: 6862 BIG PINE KEY ST  
City-St-Zip: LAKE WORTH, FL 33467

**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 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: JOAN BELENSON

PD

04/27/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date