

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000006220

FILED  
Mar 06, 2012  
Secretary of State

**Entity Name:** ISLE OF SAN MARINO NEIGHBORHOOD ASSOCIATION, INC.

**Current Principal Place of Business:**

BAYSHORE ASSOCIATION MGMT  
430 NW LAKE WHITNEY PLACE  
PORT SAINT LUCIE, FL 34986 US

**New Principal Place of Business:**

584 NW UNIVERSITY BLVD  
SUITE 703  
PORT SAINT LUCIE, FL 34986 US

**Current Mailing Address:**

BAYSHORE ASSOCIATION MGMT  
430 NW LAKE WHITNEY PLACE  
PORT SAINT LUCIE, FL 34986 US

**New Mailing Address:**

584 NW UNIVERSITY BLVD  
SUITE 703  
PORT SAINT LUCIE, FL 34986 US

**FEI Number:** 65-0591788

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BAYSHORE ASSOCIATION MGMT  
430 NW LAKE WHITNEY PLACE  
PORT SAINT LUCIE, FL 34986 US

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

CONTINENTAL GROUP INC  
584 NW UNIVERSITY BLVD  
SUITE 703  
PORT SAINT LUCIE, FL 34986 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: BYRON GOIN

03/06/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: ROMANO, JOSEPH  
Address: 430 NW LAKE WHITNEY PLACE  
City-St-Zip: PORT SAINT LUCIE, FL 34986

Title: T  
Name: JODICE, FRANK  
Address: 430 NW LAKE WHITNEY PLACE  
City-St-Zip: PORT ST. LUCIE, FL 34986

Title: S  
Name: KATCHER, RITA  
Address: 430 NW LAKE WHITNEY PLACE  
City-St-Zip: PORT SAINT LUCIE, FL 34986

Title: 1VP  
Name: TERRY, NORMAN  
Address: 430 NW LAKE WHITNEY PLACE  
City-St-Zip: STUART, FL 34986

Title: D  
Name: LARAMEE, RICHARD  
Address: 430 NW LAKE WHITNEY PLACE  
City-St-Zip: PORT SAINT LUCIE, FL 34986

I hereby 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 all other like empowered.

SIGNATURE: JOSEPH ROMANO

P

03/06/2012

Electronic Signature of Signing Officer or Director

Date