2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 23, 2009
Secretary of State

DOCUMENT# N96000001340

Entity Name: ISLAND PARK CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

4175 EAST BAY DRIVE
SUITE #205
CLEARWATER, FL 33764 US

New Principal Place of Business:

4585 140TH AVE NO
1012
CLEARWATER, FL 33762 US

Current Mailing Address:

4585 140TH AVE N. 1012
CLEARWATER, FL 33762

New Mailing Address:

4585 140TH AVE NO
1012
CLEARWATER, FL 33762 US

FEI Number: 59-3422376 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

COMMUNITY MANAGEMENT CONCEPTS, INC.
4585 140TH AVE. NORTH SUITE 1012
CLEARWATER, FL 33762 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: D ( ) Delete
Name: GRENZ, SUSAN
Address: 5 ISLAND PARK PLACE
City-St-Zip: DUNEDIN, FL 34698

Title: PD ( ) Delete
Name: HERDMAN, ROBERT
Address: 5 ISLAND PARK PLACE, #407
City-St-Zip: DUNEDIN, FL 34698

Title: TD ( ) Delete
Name: NEMANICH, BILL
Address: 5 ISLAND PARK PLACE
City-St-Zip: DUNEDIN, FL 34698

Title: D ( ) Delete
Name: KLEIN, ROGER
Address: 7 ISLAND PARK PLACE
City-St-Zip: DUNEDIN, FL 34698

Title: SD ( ) Delete
Name: STUMPFF, FRAN
Address: 5 ISLAND PARK PLACE, #302
City-St-Zip: DUNEDIN, FL 34698

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VPD (X) Change ( ) Addition
Name: LARSEN, ROGER
Address: 5 ISLAND PARK PLACE, #308
City-St-Zip: DUNEDIN, FL 34698

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 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: ROBERT HERDMAN PRES 03/23/2009
Electronic Signature of Signing Officer or Director — Date