

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000006102

FILED  
Feb 05, 2009  
Secretary of State

**Entity Name:** ISLAND WALK OF APOLLO BEACH HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

235 APOLLO BEACH BLVD  
SUITE 120  
APOLLO BEACH, FL 33572 US

**New Principal Place of Business:**

**Current Mailing Address:**

235 APOLLO BEACH BLVD  
SUITE 120  
APOLLO BEACH, FL 33572 US

**New Mailing Address:**

**FEI Number:** 59-3427114

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GANDET, MICHAEL  
235 LAKEWAY LANE  
APOLLO BEACH, FL 33572 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: VPD ( ) Delete  
Name: PRINGLE, EDITH  
Address: 210 ISLAND WATER WAY  
City-St-Zip: APOLLO BEACH, FL 33572

Title: PD ( ) Delete  
Name: VAZQUEZ, ENRIQUE  
Address: 118 ISLAND WATER WAY  
City-St-Zip: APOLLO BEACH, FL 33572

Title: SD ( ) Delete  
Name: HUDSON, SHIRLEE  
Address: 125 ISLAND WATER WAY  
City-St-Zip: APOLLO BEACH, FL 33572

Title: TD ( ) Delete  
Name: GANDET, MICHAEL  
Address: 235 LAKEWAY LANE  
City-St-Zip: APOLLO BEACH, FL 33572

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: VPD (X) Change ( ) Addition  
Name: JORDAN, KENNETH  
Address: 122 ISLAND WATER WAY  
City-St-Zip: APOLLO BEACH, FL 33572

Title: PD (X) Change ( ) Addition  
Name: STAROSTECKI, PETER  
Address: 306 LAKEWAY LN  
City-St-Zip: APOLLO BEACH, FL 33572

Title: SD (X) Change ( ) Addition  
Name: JORDAN, LOIS  
Address: 122 ISLAND WATER WAY  
City-St-Zip: APOLLO BEACH, FL 33572

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: MICHAEL GANDET

TD

02/05/2009

Electronic Signature of Signing Officer or Director

Date