

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N96000006102

**FILED**  
**Apr 27, 2010**  
**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:**

MCGAHA, GLEN  
307 LAKEWAY LANE  
APOLLO BEACH, FL 33572 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: GLEN MCGAHA

04/27/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

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

Title: PD  
Name: STAROSTECKI, PETER  
Address: 306 LAKEWAY LN  
City-St-Zip: APOLLO BEACH, FL 33572

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

Title: TD  
Name: MCGAHA, GLEN  
Address: 307 LAKEWAY LANE  
City-St-Zip: APOLLO BEACH, FL 33572

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: GLEN MCGAHA

TD

04/27/2010

Electronic Signature of Signing Officer or Director

Date