

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000004703

FILED
Jan 11, 2011
Secretary of State

Entity Name: ISTOKPOGA LAKE ASSOCIATION, INC.

Current Principal Place of Business:

225 WILD DUCK PT.
LORIDA, FL 33857

New Principal Place of Business:

Current Mailing Address:

P.O. 205
LORIDA, FL 33857

New Mailing Address:

FEI Number: 65-0839860

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GALLOWAY, ROBERT
225 WILD DUCK PT
LORIDA, FL 33857 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: S
Name: YERLY GREENE, VIRGINIA
Address: 1620 HERON DR S
City-St-Zip: LORIDA, FL 33857

Title: D
Name: LAMPERELLI, GARY
Address: 9220 NW 33 PLACE
City-St-Zip: SUNRISE, FL 33351

Title: T
Name: WILLIAMS, RODGER
Address: 28760 DIAMOND DR
City-St-Zip: BONITA SPRINGS, FL 33876

Title: VP
Name: STEBBINS, KEN
Address: 3219 WHITE OAK RD
City-St-Zip: SEBRING, FL 33876

Title: D
Name: CHASTEEN, JERRY
Address: 101 WILD DUCK POINT
City-St-Zip: LORIDA, FL 33857

Title: P
Name: GALLOWAY, ROBERT
Address: 225 WILD DUCK POINT
City-St-Zip: LORIDA, FL 33857

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: ROBERT GALLOWAY

P

01/11/2011

Electronic Signature of Signing Officer or Director

Date