

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 14, 2008 8:00 am
Secretary of State

05-14-2008 90017 009 ****61.25

DOCUMENT # N97000002161
 1. Entity Name
 IBIS ISLE HOMEOWNERS ASSOCIATION, INC.



Principal Place of Business
 275 TONEY PENNA DR.
 #7
 JUPITER, FL 33458 US

Mailing Address
 275 TONEY PENNA DR.
 #7
 JUPITER, FL 33458 US

90102146



2. Principal Place of Business - No P.O. Box #
 1061 E. Indiantown Rd.
 Suite 410
 Jupiter, Fla. 33477 US

3. Mailing Address
 1061 E. Indiantown Rd.
 Suite 410
 Jupiter, Fla. 33477 US

01072008 Chg-NP CR2E037 (12/06)

6. Name and Address of Current Registered Agent
 THE SUNRISE COMPANIES
 275 TONEY PENNA DRIVE #7
 JUPITER, FL 33458

7. Name and Address of New Registered Agent
 Name: The Sunrise Companies
 Street Address (P.O. Box Number is Not Acceptable):
1061 E. INDIANTOWN Rd.
SUITE 410
 City: JUPITER FL Zip Code: 33477

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: [Signature] DATE: 4/18/08

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$61.25
Due by May 1, 2008

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS	
TITLE: T NAME: DUNESKY, MICKI STREET ADDRESS: 9068 LAKES BLVD CITY-ST-ZIP: WEST PALM BEACH, FL 33412	<input type="checkbox"/> Delete
TITLE: D NAME: JACOBSON, MARLA STREET ADDRESS: 9054 LAKES BLVD CITY-ST-ZIP: WEST PALM BEACH, FL 33412	<input checked="" type="checkbox"/> Delete
TITLE: D NAME: SMITH, SHELLY STREET ADDRESS: 9020 LAKES BLVD CITY-ST-ZIP: WEST PALM BEACH, FL 33412	<input checked="" type="checkbox"/> Delete
TITLE: P NAME: KUCMIEVOWSKI, VINCENT STREET ADDRESS: 9012 LAKES BLVD. CITY-ST-ZIP: WEST PALM BEACH, FL 33412	<input type="checkbox"/> Delete
TITLE: S NAME: FRIESS, NEIL STREET ADDRESS: 9006 LAKES BLVD CITY-ST-ZIP: WEST PALM BEACH, FL 33412	<input checked="" type="checkbox"/> Delete
TITLE: VP NAME: CARPENTER, RICHARD STREET ADDRESS: 8986 LAKES BLVD CITY-ST-ZIP: WEST PALM BEACH, FL 33412	<input checked="" type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE: D NAME: ROSENBERG, ROBERT STREET ADDRESS: 9036 LAKES BLVD. CITY-ST-ZIP: WEST PALM BEACH, FL 33412	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE: D NAME: SMITH, SHELDON STREET ADDRESS: 9020 LAKES BLVD. CITY-ST-ZIP: WEST PALM BEACH, FL 33412	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE: VP NAME: D'ORAZIO, BERNARD STREET ADDRESS: 9002 LAKES BLVD. CITY-ST-ZIP: WEST PALM BEACH, FL 33412	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: [Signature] Date: 4/18/08 Daytime Phone # _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR