

**2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 707788

**Entity Name:** ISLE OF PARADISE "E", INC.

**Current Principal Place of Business:**

465 PARADISE ISLE BLVD  
HALLANDALE BEACH, FL 33009

**Current Mailing Address:**

465 PARADISE ISLE BLVD  
HALLANDALE BEACH, FL 33009

**FEI Number:** 59-1091811

**Certificate of Status Desired:** No

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

STUBBS, JANE PRESIDENT  
465 PARADISE ISLE BLVD.  
#307  
HALLANDALE BEACH, FL 33009 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:** JANE STUBBS

02/05/2019

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            STUBBS, JANE  
Address        465 PARADISE ISLE BLVD. #307  
City-State-Zip: HALLANDALE BEACH FL 33009

Title            VICE PRESIDENT  
Name            BRADETTE, PIERRE  
Address        465 PARADISE ISLE BLVD. #305  
City-State-Zip: HALLANDALE BEACH FL 33009

Title            SECRETARY  
Name            GAUTHIER, LYNN  
Address        465 PARADISE ISLE BLVD. #202  
City-State-Zip: HALLANDALE BEACH FL 33009

Title            TREASURER  
Name            LEMELIN, PIERRE  
Address        465 PARADISE ISLE BLVD. #303  
City-State-Zip: HALLANDALE BEACH FL 33009

*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:** LYNN GAUTHIER

SECRETARY

02/05/2019

Electronic Signature of Signing Officer/Director Detail

Date