2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 713216

Entity Name: THE ISLAND PLAYERS, INC.

Current Principal Place of Business:

10009 GULF DRIVE ANNA MARIA, FL 34216

Current Mailing Address:

P O BOX 2059 ANNA MARIA, FL 34216 US

FEI Number: 59-1171146

Name and Address of Current Registered Agent:

FAARUP, PEGGY 2505 SONGBIRD LANE BRADENTON, FL 34209 US FILED Apr 09, 2016 Secretary of State CC5152561388

Date

Certificate of Status Desired: No

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	

Officer/Director Detail :

	Title	CORRESPONDING SECRETARY	Title	1ST VICE PRESIDENT	
	Name	HARRELL, DOLORES	Name	FAARUP, PEGGY	
	Address	6300 FLOTILLA #109	Address	2505 SONGBIRD LANE	
	City-State-Zip:	HOLMES BEACH FL 34217	City-State-Zip:	BRADENTON FL 34209	
	Title	ACCT	Title	PRESIDENT	
	Name	COOPER, BEN A	Name	BERGER, BOBBI	
	Address	P O BOX 14577	Address	1205 ESTREMAUDORA LANE	
	City-State-Zip:	BRADENTON FL 34280	City-State-Zip:	BRADENTON FL 34209	
	Title Name	RECORDING SECRETARY THOMAS, LINDA	Title Name	TREASURER MARNIE, SYLVIA	
	Name	THOMAS, LINDA	Name	MARNIE, SYLVIA P O BOX 2059	
	Name Address	THOMAS, LINDA 1704 54TH STREET CIRCLE W	Name Address	MARNIE, SYLVIA P O BOX 2059	
	Name Address City-State-Zip:	THOMAS, LINDA 1704 54TH STREET CIRCLE W BRADENTON FL 34209	Name Address City-State-Zip:	MARNIE, SYLVIA P O BOX 2059 ANNA MARIA FL 34216	
	Name Address City-State-Zip: Title	THOMAS, LINDA 1704 54TH STREET CIRCLE W BRADENTON FL 34209 TREASURER	Name Address City-State-Zip: Title	MARNIE, SYLVIA P O BOX 2059 ANNA MARIA FL 34216 2ND VICE PRESIDENT	
	Name Address City-State-Zip: Title Name	THOMAS, LINDA 1704 54TH STREET CIRCLE W BRADENTON FL 34209 TREASURER MARNIE, SYLVIA	Name Address City-State-Zip: Title Name	MARNIE, SYLVIA P O BOX 2059 ANNA MARIA FL 34216 2ND VICE PRESIDENT MORONI, MARILYN P O BOX 2059	

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: BOBBI BERGER

PRESIDENT

04/09/2016

Electronic Signature of Signing Officer/Director Detail

Date