

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 723184

Entity Name: ISLAND MANOR CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**87 N. COLLIER BLVD.
MARCO ISLAND, FL 34145**Current Mailing Address:**87 N. COLLIER BLVD.
MARCO ISLAND, FL 34145**FEI Number:** 59-1508704**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**GREUSEL, JAMIE BESQ
1104 NO COLLIER BLVD
MARCO ISLAND, FL 34145 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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title	PD
Name	MEYER, MICHAEL F
Address	87 N. COLLIER BLVD.
City-State-Zip:	MARCO ISLAND FL 34145

Title	VPD
Name	RIZZI, JAMES
Address	87 NO COLLIER BLVD
City-State-Zip:	MARCO ISLAND FL 34145

Title	DIRECTOR
Name	KIRKPATRICK, PHYLLIS
Address	87 N. COLLIER BLVD.
City-State-Zip:	MARCO ISLAND FL 34145

Title	TD
Name	JOHN, COUGHLIN
Address	87 N COLLIER BLVD
City-State-Zip:	MARCO ISLAND FL 34145

Title	DIRECTOR
Name	GONZALEZ, ANGEL
Address	87 N COLLIER BLVD
City-State-Zip:	MARCO ISLAND FL 34145

Title	SD
Name	ANDERSON, ALLEN
Address	87 N COLLIER BLVD
City-State-Zip:	MARCO ISLAND FL 34145

Title	DIRECTOR
Name	MUNCH, NANCY
Address	87 N. COLLIER BLVD.
City-State-Zip:	MARCO ISLAND FL 34145

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: MICHAEL MEYER**PRESIDENT****01/28/2016**_____
Electronic Signature of Signing Officer/Director Detail_____
Date