

**2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 729859

**Entity Name:** ISLE OF SAND KEY CONDOMINIUM ASSOCIATION INC.**Current Principal Place of Business:**4151 WOODLANDS PKWY  
PALM HARBOR, FL 34685**Current Mailing Address:**4151 WOODLANDS PKWY  
PALM HARBOR, FL 34685 US**FEI Number:** 59-1608769**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**REARDON, MAUREEN C  
4151 WOODLANDS PARKWAY  
PALM HARBOR, FL 34685 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 BRISKMAN, JOEL  
Address 4151 WOODLANDS PARKWAY  
City-State-Zip: PALM HARBOR FL 34685

Title VPD  
Name JONES, TERRY  
Address 4151 WOODLANDS PKWY  
City-State-Zip: PALM HARBOR FL 34685

Title SD  
Name CARTER, REBECCA  
Address 4151 WOODLANDS PKWY  
City-State-Zip: PALM HARBOR FL 34685

Title TD  
Name WELLER, RON  
Address 4151 WOODLANDS PKWY  
City-State-Zip: PALM HARBOR FL 34685

Title DIRECTOR  
Name AIMARO, DON  
Address 4151 WOODLANDS PKWY  
City-State-Zip: PALM HARBOR FL 34685

Title D  
Name GLASSER, BILL  
Address 4151 WOODLANDS PKWY  
City-State-Zip: PALM HARBOR FL 34685

Title DIRECTOR  
Name PALMER, JESSE  
Address 4151 WOODLANDS PKWY  
City-State-Zip: PALM HARBOR FL 34685

*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:** JOEL BRISKMAN**PRESIDENT****02/26/2018**

Electronic Signature of Signing Officer/Director Detail

Date