## 2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 739900** 

Entity Name: 736 ISLAND WAY ASSOCIATION, INC.

FILED Apr 21, 2014 Secretary of State CC6665832649

# **Current Principal Place of Business:**

251 WINDWARD PASSAGE

STE F

CLEARWATER, FL 33767

## **Current Mailing Address:**

251 WINDWARD PASSAGE

STE F

CLEARWATER, FL 33767 US

FEI Number: 59-1762876 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

JIM NOBLES MANAGEMENT, INC. 251 WINDWARD PASSAGE STE F CLEARWATER, FL 33767 US

OLEMANNIER, I E OOTOT OO

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 D, DIRECTOR Title VPD

Name NIXON, MARK Name MUNOZ, DARIO

Address 736 ISLAND WAY #806 Address 736 ISLAND WAY, 402

City-State-Zip: CLEARWATER FL 33767 City-State-Zip: CLEARWATER FL 33767

Title T, TREASURER Title PD

NameDULIN, JACKIENameBOBLENZ, RICHARDAddress736 ISLAND WAY #804Address736 ISLAND WAY #906

City-State-Zip: CLEARWATER FL 33767 City-State-Zip: CLEARWATER FL 33767

Title SD Title D

Name WIARD, BETTY Name MORGAN, CONNIE

Address 736 ISLAND WAY, #206 Address 736 ISLAND WAY #404

City-State-Zip: CLEARWATER FL 33767 City-State-Zip: CLEARWATER FL 33767

Title DIRECTOR

Name SULLIVAN, JOHN

Address 736 ISLAND WAY #1003 City-State-Zip: CLEARWATER FL 33767

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: RICHARD BOBLENZ PRESIDENT 04/21/2014