2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000000404

Entity Name: THE ISLES AT CAY COMMONS CONDOMINIUM ASSOCIATION,

INC.

FILED Feb 09, 2019 Secretary of State 3912743882CC

Current Principal Place of Business:

C/O OPTIMUM COMMUNITY MANAGEMENT, INC 7557 W. SAND LAKE RD. #131 ORLANDO, FL 32819

Current Mailing Address:

C/O OPTIMUM COMMUNITY MANAGEMENT, INC 7557 W. SAND LAKE RD. #131 ORLANDO, FL 32819 US

FEI Number: 38-3749739 Certificate of Status Desired: No.

Name and Address of Current Registered Agent:

ANDREA ZEBICK 7557 W. SAND LAKE RD. #131 ORLANDO, FL 32819 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: OPTIMUM COMMUNITY MANAGEMENT, INC 02/09/2019

> Date Electronic Signature of Registered Agent

Officer/Director Detail:

Title **PRESIDENT** Title **TREASURER**

Name FRAHM, LARAINE Name WALDRON, DANIEL

Address 7557 W. SAND LAKE RD. Address 7557 W. SAND LAKE RD. #131

#131

ORLANDO FL 32819 City-State-Zip: City-State-Zip: ORLANDO FL 32819

Title Title **SECRETARY**

COMPITELLO, BILL TARTER, ASHLEY Name Name

C/O OPTIMUM COMMUNITY C/O OPTIMUM COMMUNITY Address Address

> MANAGEMENT, INC MANAGEMENT, INC

7557 W. SAND LAKE RD. #131 7557 W. SAND LAKE RD. #131

City-State-Zip: ORLANDO FL 32819 City-State-Zip: ORLANDO FL 32819

Title DIRECTOR

Name IDREES, MOHAMMAD

Address 7557 W. SAND LAKE RD. #131

City-State-Zip: ORLANDO FL 32819

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.

02/09/2019 SIGNATURE: LARAINE FRAHM PRESIDENT