## **2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N13676

Entity Name: FISHER ISLAND COMMUNITY ASSOCIATION, INC.

FILED Feb 25, 2013 Secretary of State CC4676094752

## **Current Principal Place of Business:**

ONE FISHER ISLAND DRIVE FISHER ISLAND. FL 33109

## **Current Mailing Address:**

ONE FISHER ISLAND DRIVE FISHER ISLAND. FL 33109 US

FEI Number: 65-0004587 Certificate of Status Desired: Yes

## Name and Address of Current Registered Agent:

PEYTON BOLIN, PL 4758 W. COMMERCIAL BLVD. FT. LAUDERDALE, FL 33319 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 Title VD

 Name
 SNIDER, GARY
 Name
 VON HANAU, HEINRICH

 Address
 ONE FISHER ISLAND DRIVE
 Address
 ONE FISHER ISLAND DRIVE

City-State-Zip: FISHER ISLAND FL 33109 City-State-Zip: FISHER ISLAND FL 33109

Title TD Title SD

Name SOSA, ROBERTO Name IRIZARRY, ASHLEY

Address ONE FISHER ISLAND DRIVE Address ONE FISHER ISLAND DRIVE
City-State-Zip: FISHER ISLAND FL 33109
City-State-Zip: FISHER ISLAND FL 33109

Title D Title [

Name LORBER, HOWARD Name POTASH, IRWIN DR.

Address 8061 FISHER ISLAND DRIVE Address 2033 FISHER ISLAND DR

City-State-Zip: FISHER ISLAND FL 33109 FISHER ISLAND FL 33109

City-State-Zip: FISHER ISLAND FL 33109

Title D

Name MELNICK, LAURIE

Address 2114 FISHER ISLAND DRIVE City-State-Zip: FISHER ISLAND FL 33109

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: ASHLEY IRIZARRY SECRETARY 02/25/2013

Electronic Signature of Signing Officer/Director Detail

Date