

**2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N17596

**FILED**  
**Apr 13, 2021**  
**Secretary of State**  
**2437259211CC**

**Entity Name:** ISLAND PLACE AT HARBOURSIDE OWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

5901 SUN BLVD  
SUITE 103  
SAINT PETERSBURG, FL 33715

**Current Mailing Address:**

5901 SUN BLVD  
SUITE 103  
SAINT PETERSBURG, FL 33715 US

**FEI Number:** 59-2739877

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

ANNE M MALLEY PA  
1230 S MYRTLE AVE  
SUITE 105  
CLEARWATER, FL 33756 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:** NATALE ABRUZZO

04/13/2021

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            WROBLEWSKI, WILLIAM  
Address        5901 SUN BLVD  
                  SUITE 103  
City-State-Zip: SAINT PETERSBURG FL 33715

Title            VP  
Name            MCLAREN, CHRIS  
Address        5901 SUN BLVD  
                  SUITE 103  
City-State-Zip: SAINT PETERSBURG FL 33715

Title            SECRETARY  
Name            BUDDEN, CAROLYN  
Address        5901 SUN BLVD  
                  SUITE 103  
City-State-Zip: SAINT PETERSBURG FL 33715

Title            DIRECTOR  
Name            NATHWANI, AMAR  
Address        5901 SUN BLVD.  
                  SUITE 103  
City-State-Zip: ST. PETERSBURG FL 33715

*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:** WILLIAM WROBLEWSKI

**PRESIDENT**

04/13/2021

Electronic Signature of Signing Officer/Director Detail

Date