

**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N22755

**FILED**  
**Feb 23, 2016**  
**Secretary of State**  
**CC1733116974**

**Entity Name:** EAST HIGH POINT/ISLAND ROAD ASSOCIATION, INC.

**Current Principal Place of Business:**

17 ISLAND ROAD  
STUART, FL 34996

**Current Mailing Address:**

17 ISLAND ROAD  
STUART, FL 34996

**FEI Number:** 65-0033759

**Certificate of Status Desired:** No

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

PANTON, JO ELLEN  
17 ISLAND RD  
STUART, FL 34996 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 P  
Name MILDENBERGER, JOHN  
Address 8 EAST HIGH POINT  
City-State-Zip: STUART FL 34996

Title VP  
Name MAJEWSKI, TED  
Address 24 EAST HIGHT POINT  
City-State-Zip: STUART FL 34996

Title ST  
Name PANTON, ELLEN J  
Address 17 ISLAND ROAD  
City-State-Zip: STUART FL 34996

Title D  
Name COTTON, STEPHANN  
Address 11 ISLAND RD  
City-State-Zip: STUART FL 34996

Title DIRECTOR  
Name MAYFIELD, JEFF  
Address 2 EAST HIGH POINT ROAD  
City-State-Zip: STUART FL 34996

*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:** JO ELLEN PANTON

**SECRETARY/TREASURER** 02/23/2016

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date