

2023 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N46739

Entity Name: THE ISLES ASSOCIATION, INC.

FILED
Nov 02, 2023
Secretary of State
5920840428CC

Current Principal Place of Business:

C/O CLEAR CHOICE MANAGEMENT SOLUTIONS, INC.
3301 N. UNIVERSITY DRIVE SUITE 100
CORAL SPRINGS, FL 33065

Current Mailing Address:

C/O CLEAR CHOICE MANAGEMENT SOLUTIONS, INC.
3301 N. UNIVERSITY DRIVE SUITE 100
CORAL SPRINGS, FL 33065 US

FEI Number: 65-0331886

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CLEAR CHOICE MANAGEMENT SOLUTIONS INC.
C/O CLEAR CHOICE MANAGEMENT SOLUTIONS, INC.
3301 N. UNIVERSITY DRIVE SUITE 100
CORAL SPRINGS, FL 33065 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: SHARI FIELDS

11/02/2023

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title TREASURER
Name AFROMOWITZ, ALAN
Address C/O CLEAR CHOICE MANAGEMENT SOLUTIONS, INC.
 3301 N. UNIVERSITY DRIVE SUITE 100

Title DIRECTOR
Name PILLINGER, DENNIS
Address C/O CLEAR CHOICE MANAGEMENT SOLUTIONS, INC.
 3301 N. UNIVERSITY DRIVE SUITE 100

City-State-Zip: CORAL SPRINGS FL 33065

City-State-Zip: CORAL SPRINGS FL 33065

Title VP
Name GARVEY, KEVIN JR.
Address C/O CLEAR CHOICE MANAGEMENT SOLUTIONS, INC.
 3301 N. UNIVERSITY DRIVE SUITE 100

Title PRESIDENT
Name HOROWITZ, TERRY
Address C/O CLEAR CHOICE MANAGEMENT SOLUTIONS, INC.
 3301 N. UNIVERSITY DRIVE SUITE 100

City-State-Zip: CORAL SPRINGS FL 33065

City-State-Zip: CORAL SPRINGS FL 33065

Title DIRECTOR
Name DRAGOTAS, ANGELICA
Address C/O CLEAR CHOICE MANAGEMENT SOLUTIONS, INC.
 3301 N. UNIVERSITY DRIVE SUITE 100

City-State-Zip: CORAL SPRINGS FL 33065

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: TERRY HOROWITZ

PRESIDENT

11/02/2023

Electronic Signature of Signing Officer/Director Detail

Date