

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 12, 2007 8:00 am
Secretary of State

03-12-2007 90377 008 ****61.25

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1. Entity Name

51 ISLAND WAY CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

Mailing Address

2870 SCHERER DR, N
 SUITE 100
 SAINT PETERSBURG FL 33716

2870 SCHERER DR, N
 SUITE 100
 SAINT PETERSBURG FL 33716
 US



1st MOORE CR2E037 (10/06)

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-1849919

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BRUDNY, MICHAEL
 200 NORTH PINE AVE
 SUITE A
 OLDSMAR FL 34677

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2007

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE P Delete
 NAME FERGUSON, ERMA
 STREET ADDRESS 51 ISLAND WAY, #1110
 CITY-ST-ZIP CLEARWATER FL 33767

TITLE VP Change Addition
 NAME Joe Vitale
 STREET ADDRESS 51 Island Way # 807
 CITY-ST-ZIP Clearwater, FL 33747

TITLE DS Delete
 NAME OTTILLIE, BARBARA
 STREET ADDRESS 51 ISLAND WAY #502
 CITY-ST-ZIP CLEARWATER FL 33761

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE T Delete
 NAME LANE, ADAM
 STREET ADDRESS 51 ISLAND WAY #210
 CITY-ST-ZIP CLEARWATER BEACH FL 33767

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE SR Delete
 NAME DURSHORDWE, WILLIAM
 STREET ADDRESS 51 ISLAND WAY #505
 CITY-ST-ZIP CLEARWATER FL 33767

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Erma C. Ferguson

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #