

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N28711

Entity Name: PACE ISLAND OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

463499 STATE ROAD 200
YULEE, FL 32097

Current Mailing Address:

P O BOX 1987
YULEE, FL 32041 US

FEI Number: 59-2927306

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PROPERTY MANAGEMENT SYSTEMS INC
463499 STATE ROAD 200
YULEE, FL 32097 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
Name KAZIMAR, MICHAEL A
Address P O BOX 1987
City-State-Zip: YULEE FL 32041

Title VPD
Name MORIARTY, JOHN
Address P O BOX 1987
City-State-Zip: YULEE FL 32041

Title SD
Name RYNNE, CAROL L
Address P O BOX 1987
City-State-Zip: YULEE FL 32041

Title TD
Name JEAKLE, JOHN JR
Address P O BOX 1987
City-State-Zip: YULEE FL 32041

Title D
Name LIPPMAN, MICHAEL
Address P O BOX 1987
City-State-Zip: YULEE FL 32041

Title D
Name MULLENNIX, DAVID R
Address P O BOX 1987
City-State-Zip: YULEE FL 32041

Title D
Name KYRAZIS, THEODORE G II
Address P O BOX 1987
City-State-Zip: YULEE FL 32041

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: MICHAEL KAZIMAR

PRESIDENT

04/18/2014

Electronic Signature of Signing Officer/Director Detail

Date