

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 05, 2002 8:00 am
Secretary of State

03-05-2002 90134 048 ****61.25

DOCUMENT # 723414

1. Entity Name

THE CONDOMINIUMS OF INDIAN HARBOUR ASSOCIATION, INC.

Principal Place of Business SCHL RD. & CHEYENNE BLVD. IND HARBOUR POST OFFICE BOX 372713 SATELLITE BEACH FL 32937-7713	Mailing Address SCHL RD. & CHEYENNE BLVD. IND HARBOUR POST OFFICE BOX 372713 SATELLITE BEACH FL 32937-7713
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State

4. FEI Number 59-1483721	Applied For <input type="checkbox"/> Not Applicable
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Zip	Country	Zip	Country
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5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

PRIME, WILLIAM
412 SCHOOL ROAD, #85
INDIAN HARBOUR BEACH FL 32937

7. Name and Address of New Registered Agent

Name B. Gordon Skinner
Street Address (P.O. Box Number is Not Acceptable) 414 School Rd. #93
City Indian Harbor Bch. FL Zip Code 32937

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.

SIGNATURE *B. Gordon Skinner* **Gordon Skinner** 2/1/2002
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

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD NICODEMUS, ROSE MARIE 403 SCHOOL ROAD, #61 INDIAN HARBOUR BEACH FL 32937 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD-Ruth Ashby 415 School Rd. #65 Indian Harbor Bch., Fl. 32937 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD PRIME, WILLIAM 412 SCHOOL ROAD # 85 INDIAN HARBOUR BEACH FL 32937 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD-Burl Martin 1047 Small Ct. #37 Indian Harbor Beach, Fl. 32937 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD SABO, THELMA 414 SCHOOL ROAD # 98 INDIAN HARBOUR BEACH FL 32937 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD-Ruth Graves 415 School Rd. #69 Indian Harbor Bch. Fl. 32937 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD SMITH, DONALD W. 403 SCHOOL ROAD, #62 INDIAN HARBOUR BEACH FL 32937 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RODRIGUEZ, MANUEL 415 SCHOOL ROAD # 69 INDIAN HARBOUR BEACH FL 32937 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D-B. Gordan Skinner 414 School Rd. #93 Indian Harbor Bch., Fl. 32937 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: *L. Ruth Ashby* **L. RUTH ASHBY** 2/1/2002
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (9/01)