

FILE NOW: FILING FEE IS \$61.25

FILED

**Apr 23 1998 8:00am
Secretary of State**

| | | |
|---|---|---|
| NONPROFIT CORPORATION ANNUAL REPORT 1998 |  | FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS |
|---|---|---|

DOCUMENT # 731666 (4)
 1. Corporation Name
INDIAN SPRING MAINTENANCE ASSOCIATION, INC.



| | |
|--|--|
| Principal Place of Business 5995 BANNOCK TERRACE BOYTON BCH FL 33437 | Mailing Address 5995 BANNOCK TERRACE BOYTON BCH FL 33437 |
|--|--|

3. Date Incorporated or Qualified
01/21/1975

4. FEI Number
59-1753758

| | |
|-------------|----------------|
| Applied For | Not Applicable |
|-------------|----------------|

| | |
|--|--|
| 21. Principal Place of Business Suite, Apt. #, etc. City & State Zip Country | 22. Mailing Address Suite, Apt. #, etc. City & State Zip Country |
|--|--|

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

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

7. Is this nonprofit corporation a homeowners association?
 Yes No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No

9. Name and Address of Current Registered Agent

**BARTLETT, JOE
C/O CRYSTAL COMMUNITY MGMT.
5995 BANNOCK TERRACE
BOYNTON BEACH FL 33437**

10. Name and Address of New Registered Agent

| | |
|---|-------------|
| 81 Name | 85 Zip Code |
| 82 Street Address (P.O. Box Number is Not Acceptable) | FL |
| 83 | |
| 84 City | |

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

| 12. OFFICERS AND DIRECTORS | |
|----------------------------|------------------------------------|
| TITLE | VD <input type="checkbox"/> DELETE |
| NAME | KAPLAN, ALVIN |
| STREET ADDRESS | 5160 W. WOOLBRIGHT ROAD |
| CITY-ST-ZIP | BOYNTON BEACH FL |
| TITLE | DP <input type="checkbox"/> DELETE |
| NAME | PROUJANSKY, ALBERT N. |
| STREET ADDRESS | 5160 W. WOOLBRIGHT ROAD |
| CITY-ST-ZIP | BOYNTON BEACH FL |
| TITLE | D <input type="checkbox"/> DELETE |
| NAME | GREENBERG, LEONARD E. |
| STREET ADDRESS | 5160 W. WOOLBRIGHT ROAD |
| CITY-ST-ZIP | BOYTON BCH, FL 00000 |
| TITLE | TD <input type="checkbox"/> DELETE |
| NAME | ECHELSON, IVAN |
| STREET ADDRESS | 5160 W. WOOLBRIGHT ROAD |
| CITY-ST-ZIP | BOYTON BCH, FL 00000 |
| TITLE | D <input type="checkbox"/> DELETE |
| NAME | HERSH, COL EDWARD |
| STREET ADDRESS | 5682 AINSLEY COURT |
| CITY-ST-ZIP | BOYTON BCH, FL 00000 |
| TITLE | D <input type="checkbox"/> DELETE |
| NAME | GOLDNER, ALFRED |
| STREET ADDRESS | 5660 FAIRWAY PARK DRIVE |
| CITY-ST-ZIP | BOYNTON BEACH FL |

| 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | |
|---|---|
| 1.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 1.2 NAME | |
| 1.3 STREET ADDRESS | 11500 E1 Clair Ranch Road |
| 1.4 CITY-ST-ZIP | |
| 2.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 2.2 NAME | |
| 2.3 STREET ADDRESS | 11500 E1 Clair Ranch Road |
| 2.4 CITY-ST-ZIP | |
| 3.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 3.2 NAME | |
| 3.3 STREET ADDRESS | 11500 E1 Clair Ranch Road |
| 3.4 CITY-ST-ZIP | |
| 4.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 4.2 NAME | |
| 4.3 STREET ADDRESS | 11500 E1 Clair Ranch Road |
| 4.4 CITY-ST-ZIP | |
| 5.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 5.2 NAME | |
| 5.3 STREET ADDRESS | |
| 5.4 CITY-ST-ZIP | |
| 6.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 6.2 NAME | |
| 6.3 STREET ADDRESS | |
| 6.4 CITY-ST-ZIP | |

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *[Handwritten Signature]* **8/18/98** **(561) 737 5805**

CR2E037 (10/97)

Indian Spring Maintenance Association, Inc.

5995 Bannock Terrace
Boynton Beach, FL 33437
734-8005

D

HERMAN, ROBERT
11955 MONT LAKE DRIVE
BOYNTON BEACH, FL

D

MILLER, WILLIAM
5285 STONYBROOK DRIVE
BOYNTON BEACH, FL

SD

KUEHN, JOAN
11500 EL CLAIR RANCH ROAD
BOYNTON BEACH, FL