2005 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

DOCUMENT'#746288

COMPLEX ONE OF INDIAN HARBOUR BEACH INDUSTRIAL PARK, INC.

FILED Apr 28, 2005 08:00 AM Secretary of State

Principal Place of Business

C/O LITTLEFIELD AND WHITWORTH 2800 AURORA RD., STE. C MELBOURNE, FL 32935-2096 US Mailing Address

% LITTLEFIELD & WHITWORTH 2800 AURORA RD., STE. C MELBOURNE, FL 32935-2096 US



02082005 No Chg-NP

CR2E037 (10/03)

4.	FEI Number	
	59-1932186	

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPA	ICE
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6. Name and Address of Current Registered Agent

DO NOT WRITE IN THIS SPACE

NORTHCUTT, WILLIAM R 2194 HWY A1A SUITE 306 INDIAN HARBOR BEACH, FL 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. I am familiar with, and accept the obligations of registered agent. ে তাৰ দেশ তেওঁ সাধাৰ সভা কৰা কৰা কৰিছে লগতে কৰা কৰিছে কৰি চাৰকাৰ উদ্দৰণ কৰা কৰা কৰিছে লগতে কৰিছে । তাৰ দেশত তেওঁ সাধাৰ সভা কৰা কৰা কৰিছে লগতে কৰা কৰিছে কৰি চাৰকাৰ স্থানিক কৰিছে কৰিছে লগতে কৰিছে । তাৰ চুক্তি কো SIGNATURE. ो नक्षी एक रक्ष pare "वेट एक्ष क्षान्त्र क्रियोव है इसे Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstalling) 9. Election Campaign Financing \$5.00 мау Ве Filing Fee is \$61.25 U00000340633 Trust Fund Contribution. ... Added to Fees Due by May 1, 2005 28/05-80125-016 OFFICERS AND DIRECTORS 10. TITLE MITCHELL, DENISE MAME STREET ADDRESS 131 TOMAHAWK DR., #5 CITY-ST-ZIP INDIAN HARBOUR BEACH, FL 32937 TITE NAME JEWELL, DOUGLAS STREET ADDRESS 401 6TH AVE CITY-ST-ZIP INDIALANTIC, FL 32903 VPD TITLE NAME BRENNAN, ROBERT STREET ADDRESS 111 ANGONQUIN TERRACE DO NOT WRITE CITY-ST-ZIP INDIAN HARBOUR BEACH, FL 32937 TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE All and their at Right a NAME grant of the second of the STREET ADDRESS CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not quality for the exemption stated in Section 119.07(3)(1). 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:

SIGNING OFFICER OR DIRECTOR

Douglas Jewell

4/22/05

321-779-0300