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FILED
Mar 17 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 752068 (7)

1. Corporation Name
INDIAN PINES VILLAGE CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business 6000 INDRIO ROAD FT PIERCE FL 34951-3205	Mailing Address 6000 INDRIO ROAD FT PIERCE FL 34951-3205
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2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified 04/17/1980	3a. Date of Last Report 03/01/1996
21. Suite, Apt. #, etc.	26. Suite, Apt. #, etc.	4. FEI Number 95-2951234	Applied For <input type="checkbox"/> Not Applicable
22. City & State	27. City & State	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
23. Zip	28. Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
24. Country	29. Country	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

**JANE L. CORNETT, ESQ
401 E. OSCEOLA STREET
STUART FL 34995**

10. Name and Address of New Registered Agent

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

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	TD FRIGAUT, ALEX	<input checked="" type="checkbox"/> DELETE
STREET ADDRESS	6034 INDRIO RD FT. PIERCE FL	
CITY-ST-ZIP		
TITLE	PD ARCHIBALD, JOHN	<input checked="" type="checkbox"/> DELETE
STREET ADDRESS	6032 INDRIO RD FT. PIERCE FL	
CITY-ST-ZIP		
TITLE	SD HAAS, LUDWIG	<input type="checkbox"/> DELETE
STREET ADDRESS	6032 INDRIO RD. UNIT P-6 FT. PIERCE FL 34951	
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
1.1 TITLE	PD POLIZATTO, PETER	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	6924 INDRIO RD # L-4 FT PIERCE, FL 34951	
1.3 STREET ADDRESS		
1.4 CITY-ST-ZIP		
2.1 TITLE	TD SUBSS, KENNETH	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	118 HURDLE DR BEHEL PARK, PA 15102	
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE	VPD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE	SD RONDEAU, PAUL	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.2 NAME	9 EAGLE LANE CANDLER, NC 28715	
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE	D BERGANI, Leland	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
5.2 NAME	6094 INDRIO RD # A-4 FT PIERCE, FL 34951	
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 do 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 in an attachment with an address.

SIGNATURE _____ DATE **MAR 15 1997**

CR2E037 (9/96)