

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Apr 20, 2009
Secretary of State**

DOCUMENT# 753765

Entity Name: THE INTERCOASTAL CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

19727 GULF BLVD.
207
INDIAN SHORES, FL 33785

New Principal Place of Business:

Current Mailing Address:

19727 GULF BLVD.
207
INDIAN SHORES, FL 33785

New Mailing Address:

FEI Number: 59-2192231 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NELMS, CHARLES
4175 E. BAY DR.
#250
CLEARWATER, FL 33764 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: NELMS, CHARLES
Address: 4175 E. BAY DR. #250
City-St-Zip: CLEARWATER, FL 33764

Title: DT () Delete
Name: LEWIS, DAVID
Address: 19727 GULF BLVD #208
City-St-Zip: INDIAN SHORES, FL 33785

Title: D () Delete
Name: LUKOWSKI, LILLIAN
Address: P.O. BOX 636
City-St-Zip: SAINT PETERSBURG, FL 33731

Title: DVP () Delete
Name: MINARDEO, GREG
Address: 19727 GULF BLVD. #201
City-St-Zip: INDIAN ROCKS BEACH, FL 33785

Title: DS () Delete
Name: CAROLINE, KAY
Address: 19727 GULF BLVD. #110
City-St-Zip: INDIAN ROCKS BEACH, FL 33785

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: DS (X) Change () Addition
Name: HARRISON, ARNELL
Address: 19727 GULF BLVD. #209
City-St-Zip: INDIAN SHORES, FL 33785

Title: DVP (X) Change () Addition
Name: OERTEL, KATHRYN
Address: 215 E BAY STREET #7
City-St-Zip: LAKELAND, FL 33801

Title: D (X) Change () Addition
Name: CAROLINE, KAY
Address: 19727 GULF BLVD. #110
City-St-Zip: INDIAN ROCKS BEACH, FL 33785

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: CHARLES NELMS

P

04/20/2009

Electronic Signature of Signing Officer or Director

Date