

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Jan 24, 2012
Secretary of State**

DOCUMENT# 760275

Entity Name: INDIAN CREEK CLUB & MARINA CONDOMINIUM ASSOCIATION NORTH, INC.

Current Principal Place of Business:

6830 INDIAN CREEK DR.
MIAMI BEACH, FL 33141 US

New Principal Place of Business:

Current Mailing Address:

C/O CAM MANAGEMENT SERVICES, CORP.
P.O. BOX 5103
HIALEAH, FL 330141103 US

New Mailing Address:

FEI Number: 59-2185566 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

GONZALEZ, ANITA
CAM MANAGEMENT SERVICES
6065 NW 167TH ST UNIT B-19
MIAMI LAKES, FL 33015 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: TD
Name: LEONHART, CAROLYN
Address: 6830 INDIAN CREEK DRIVE #4C
City-St-Zip: MIAMI BEACH, FL 33141 US

Title: VP
Name: GACITUA, JULIO
Address: 6830 INDIAN CREEK DR SUITE 8C
City-St-Zip: MIAMI BEACH, FL 33141 US

Title: SD
Name: RODRIGUEZ, ROSE MARY
Address: 6830 INDIAN CREEK DR SUITE 4D
City-St-Zip: MIAMI BEACH, FL 33141 US

Title: D
Name: WARMAN, VIBEKE
Address: 6830 INDIAN CREEK DR SUITE 4F
City-St-Zip: MIAMI BEACH, FL 33141 US

Title: PD
Name: DUHARTE, LILLIAN
Address: 6830 INDIAN CREEK DR. #3C
City-St-Zip: MIAMI BEACH, FL 33141 US

I hereby 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 all other like empowered.

SIGNATURE: LILLIAN DUHARTE

PD

01/24/2012

Electronic Signature of Signing Officer or Director

_____ Date