2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2009
Secretary of State

DOCUMENT# 770843

Entity Name: INDIAN OAKS HOMEOWNERS ASSOCIATION OF TALLAHASSEE, INC.

Current Principal Place of Business:

528 E. PARK AVENUE
TALLAHASSEE, FL 32301

New Principal Place of Business:

Current Mailing Address:

528 E. PARK AVENUE
TALLAHASSEE, FL 32301

New Mailing Address:

FEI Number: 59-2459655 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ISAACS, DAN L
528 E. PARK AVENUE
TALLAHASSEE, FL 32301 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: DPT ( ) Delete
Name: LUZIETTI, GINO
Address: 4476 BAYSHORE CIRCLE
City-St-Zip: TALLAHASSEE, FL 32308

Title: DS ( ) Delete
Name: TONER, KEN
Address: 9601 MICCOSUKEE RD., #48
City-St-Zip: TALLAHASSEE, FL 32308

Title: DVP ( ) Delete
Name: LUZIETTI, JOHN
Address: 11211 MOUNTAINCREST DRIVE
City-St-Zip: HUNTSVILLE, AL 35803

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPT (X) Change ( ) Addition
Name: LUZIETTI, GINO
Address: 3513 COLONNADE DRIVE
City-St-Zip: TALLAHASSEE, FL 32309

Title: DS (X) Change ( ) Addition
Name: TONER, KEN
Address: PO BOX 21209
City-St-Zip: TALLAHASSEE, FL 32316

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

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: GINO LUZIETTI DP 04/28/2009

Electronic Signature of Signing Officer or Director Date