2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000003177

FILED Jul 21, 2005 Secretary of State

Entity Name: INDEPENDENCE COMMUNITY ASSOCIATION, INC.

Current Principal Place of Business:		New Principal Place of Business:	
3300 UNIVERSITY DRIVE CORAL SPRINGS, FL 33065		3300 UNIVERSITY DRIVE SUITE 1 CORAL SPRINGS, FL 33065	
Current Mailing Address:		New Mailing Address:	
3300 UNIVERSITY DRIVE CORAL SPRINGS, FL 33065		3300 UNIVERSITY DRIVE SUITE 1 CORAL SPRINGS, FL 33065	
	649523 FEI Number Applied For() FEI N th s. 607.193(2)(b), F.S., the corporation did not receiv dress of Current Registered Agent:	•	
IMON, ERIC A			
UITE 250	ALE, FL 33309 US		
UITE 250 T. LAUDERD/	ALE, FL 33309 US ned entity submits this statement for the purpose	e of changing	its registered office or registered agent, or both,
UITE 250 T. LAUDERD/ he above nam the State of F	ALE, FL 33309 US ned entity submits this statement for the purpose Florida.	e of changing	
UITE 250 T. LAUDERD/ he above nam the State of F	ALE, FL 33309 US ned entity submits this statement for the purpose	e of changing	its registered office or registered agent, or both, Date
UITE 250 T. LAUDERD, he above nam the State of F IGNATURE:	ALE, FL 33309 US ned entity submits this statement for the purpose Florida.		
UITE 250 T. LAUDERD he above nam the State of F IGNATURE: - FFICERS AN tte: ame: ddress:	ALE, FL 33309 US ned entity submits this statement for the purpose florida. Electronic Signature of Registered Agent		Date
UITE 250 T. LAUDERD, he above nam the State of F IGNATURE:	ALE, FL 33309 US ned entity submits this statement for the purpose florida. Electronic Signature of Registered Agent ID DIRECTORS:	ADDITION Title: Name: Address:	Date NS/CHANGES TO OFFICERS AND DIRECTOR DP () Change (X) Addition HILLIARD, ROBERT 3300 UNIVERSITY DRIVE SUITE 1

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: ROBERT HILLIARD P 07/21/2005