2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 09, 2007 8:00 am
Secretary of State
04-09-2007 90065 041 ****61.25

DOCUMENT # N14911

1. Entity Name
INDIAN TRAILS CLUB, INC.

40053634

Principal Place of Business	Mailing Address
C/O ELLIOT MERILL MANAGEMENT 835 20TH PLACE VERO BEACH, FL 32960 US	C/O ELLIOT MERILL MANAGEMENT 835 20TH PLACE VERO BEACH, FL 32960 US

02222007 Chg-NP CR2E037 (12/06)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 36-3517986 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

MERRILL, KAREN L
C/O ELLIOTT MERRILL COMMUNITY MGMT
835 20TH PLACE
VERO BEACH, FL 32960

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City **FL** Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee Is $61.25
Due by May 1, 2007

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S DALILI, JAMI 861 RIVER TRL VERO BEACH, FL 32963	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Dalili, Jami 861 River Trail Vero Beach, FL 32963	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P SCULLY, ROBERT 960 RIVER TRL VERO BEACH, FL 32963	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Scully, Robert 960 River Trail Vero Beach FL 32963	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BROWN, RICHARD 681 N TOMAHAWK TRL VERO BEACH, FL 32963	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP SPOSA, HELEN 320 LEGEND TRAIL VERO BEACH, FL 32963	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP, S	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D GAINES, KEVIN 140 SEASIDE TRL VERO BEACH, FL 32963	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD Kathleen Voorhees 1031 River Trail Vero Beach FL 32963	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP KRANZE, RICHARD 661 N TOMAHAWK TRL VERO BEACH, FL 32963	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD Doug Reardon 880 River Trail Vero Beach, FL 32963	☐ Change ☒ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Kathleen Voorhees Kathleen Voorhees 2/26/07 234 4911
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

ATTACHMENT
400536 34
#N14911

D
Ralph Perry
910 River Trail
Vero Beach FL 32963

Addition