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FILED
Feb 19 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # N95000002572 (4)
 1. Corporation Name

HOMEOWNERS ASSOCIATION OF INDIAN ROCKS BEACH INC



Principal Place of Business: **814 HIDDEN HARBOUR DR INDIAN ROCKS BEACH FL 33785**
 Mailing Address: **814 HIDDEN HARBOUR DR INDIAN ROCKS BEACH FL 33785**

3. Date Incorporated or Qualified: **05/26/1995**
 4. FEI Number: **65-0640904**
 Applied For: Not Applicable

2. Principal Place of Business: **21** Suite, Apt. #, etc. **22** City & State **23** Zip **24** Country **25**
 2a. Mailing Address: **26** Suite, Apt. #, etc. **27** City & State **28** Zip **29** Country **30**

6. Certificate of Status Desired **\$8.75 Additional Fee Required**
 6. Election Campaign Financing Trust Fund Contribution **\$5.00 May Be Added to Fees**
 7. Is this nonprofit corporation a homeowners association? Yes No
 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

DIMA, JOSEPH
814 HIDDEN HARBOUR DR
INDIAN ROCKS BEACH FL 33785

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** **85** Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS

TITLE	P <input type="checkbox"/> DELETE
NAME	DIMA, JOE
STREET ADDRESS	814 HIDDEN HARBOUR DR
CITY-ST-ZIP	INDIAN ROCKS BEACH FL 33785
TITLE	V <input type="checkbox"/> DELETE
NAME	TORGENSEN, LARRY
STREET ADDRESS	2013 BAYVIEW PL.
CITY-ST-ZIP	INDIAN ROCKS BEACH FL 33785
TITLE	S <input type="checkbox"/> DELETE
NAME	CRYSTAL, CAROL
STREET ADDRESS	103 18TH AVE #5
CITY-ST-ZIP	INDIAN ROCKS BEACH FL 33785
TITLE	T <input type="checkbox"/> DELETE
NAME	JOHNSON, JEFF
STREET ADDRESS	912 HARBOUR HOUSE DR
CITY-ST-ZIP	INDIAN ROCKS BEACH FL 34635
TITLE	D <input type="checkbox"/> DELETE
NAME	FEDRIGO, FRED
STREET ADDRESS	914 HARBOUR HOUSE DR
CITY-ST-ZIP	INDIAN ROCKS BEACH FL 33785
TITLE	D <input type="checkbox"/> DELETE
NAME	HAYES, JIM
STREET ADDRESS	814 HIDDEN HARBOUR DR
CITY-ST-ZIP	INDIAN ROCKS BEACH FL 33785

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *V. Joseph Dimas* *President* **6/13/98** **813-595-1148**

CR2E037 (10/97)