

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 768416

Entity Name: INDEPENDENCE BAY COMMUNITY ASSOCIATION, INC.**Current Principal Place of Business:**1776 INDEPENDENCE DR.
DEERFIELD BEACH, FL 33442**Current Mailing Address:**C/O PREMIER ASSOCIATION SERVICES
2800 W. STATE ROAD 84 SUITE 118
FT. LAUDERDALE, FL 33312**FEI Number:** 59-2333774**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BECKER & POLIAKOFF
1 EAST BROWARD BLVD., SUITE 1800
FT. LAUDERDALE, FL 33301 US*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**Officer/Director Detail :**

Title	DIRECTOR
Name	SMYTH, DAVID
Address	2800 W. STATE RD 84 SUITE 118
City-State-Zip:	FT. LAUDERDALE FL 33312

Title	TREASURER
Name	WILLIAMS, ANN
Address	2800 W. STATE ROAD 84 SUITE 118
City-State-Zip:	FT. LAUDERDALE FL 33312

Title	DIRECTOR
Name	TARVER, JACQUE
Address	2800 W. STATE RD. 84 SUITE 118
City-State-Zip:	FT. LAUDERDALE FL 33312

Title	DIRECTOR
Name	TIMMONS, WILEY
Address	2800 W. STATE RD 84 SUITE 118
City-State-Zip:	FT. LAUDERDALE FL 33312

Title	VP
Name	ELDABBAS, MAIDA
Address	2800 W. STATE RD. 84 SUITE 118
City-State-Zip:	FT. LAUDERDALE FL 33312

Title	PRESIDENT
Name	CUTOLO, ROBERT
Address	2800 W, STATE RD 84 SUITE 118
City-State-Zip:	FT. LAUDERDALE FL 33312

Title	DIRECTOR
Name	JOHNNSON, CARMEN
Address	2800 W. STATE RD. 84 118
City-State-Zip:	FT. LAUDERDALE FL 33312

Title	DIRECTOR
Name	APPLEBEE, DAWN
Address	2800 W. STATE RD 84 118
City-State-Zip:	FT. LAUDERDALE FL 33312

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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: ROBERT CUTOLO**PRESIDENT****04/22/2018**_____
Electronic Signature of Signing Officer/Director Detail_____
Date

Officer/Director Detail Continued :

Title	SEC.
Name	HANSEN, BOB
Address	C/O PREMIER ASSOCIATION SERVICES 2800 W. STATE ROAD 84 SUITE 118
City-State-Zip:	FT. LAUDERDALE FL 33312