2015 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 ASSOCIAITON SERVICES 2800 W. STATE ROAD84 SUITE 118 FT. LAUDERDALE, FL 33312

FEI Number: 59-2333774

Name and Address of Current Registered Agent:

BECKER & POLIAKOFF 1 EAST BROWARD BLVD., SUITE 1800 FT. LAUDERDALE, FL 33301 US FILED Mar 30, 2015 Secretary of State CC1701250315

Certificate of Status Desired: No

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

Officer/Director Detail :

Officer/Director Detail :					
Title	PRES.	Title	2ND TRES.		
Name	BOSS, LOTUS	Name	WILLIAMS, ANN		
Address	2800 W. STATE RD84 SUITE 118	Address	2800 W. STATE ROAD84 SUITE 118		
City-State-Zip:	FT. LAUDERDALE FL 33312	City-State-Zip:	FT. LAUDERDALE FL 33312		
Title	VP	Title	DIRECTOR		
Name	TARVER, JACQUE	Name	TIMMONS, WILEY		
Address	2800 W. STATE RD.84 SUITE 118	Address	2800 W. STATE RD84 SUITE 118		
City-State-Zip:	FT. LAUDERDALE FL 33312	City-State-Zip:	FT. LAUDERDALE FL 33312		
Title	DIRECTOR	Title	TREASURER		
Name	ELDABBAS, MAIDA	Name	CUTOLO, ROBERT		
Address	2800 W. STATE RD.84 SUITE 118	Address	2800 W, STATE RD84 SUITE 118		
City-State-Zip:	FT. LAUDERDALE FL 33312	City-State-Zip:	FT. LAUDERDALE FL 33312		
Title	DIRECTOR	Title	DIRECTOR		
Name	GAIL HOPLER FITZPATRICK, GAIL	Name	APPLEBEE, DAWN		
Address	2800 W. STATE RD.84 118	Address	2800 W. STATE RD84 118		
City-State-Zip:	FT. LAUDERDALE FL 33312	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: LOTU	SBOSS	PRESIDENT	03/30/2015

Electronic Signature of Signing Officer/Director Detail

Date

Date

Officer/Director Detail Continued :

Title	SEC.
Name	HANSEN, BOB
Address	C/O PREMIER ASSOCIAITON SERVICES 2800 W. STATE ROAD84 SUITE 118
City-State-Zip:	FT. LAUDERDALE FL 33312