

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09330

Entity Name: INDIAN BEACH-SAPPHIRE SHORES NEIGHBORHOOD ASSOCIATION, INC.**Current Principal Place of Business:**520 12TH STREET W.
#203
BRADENTON, FL 34234**Current Mailing Address:**P.O. BOX 49673
SARASOTA, FL 34230 US**FEI Number: 35-2562858****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**TEBRUGGE, ADAM
520 12TH STREET W.
#203
BRADENTON, FL 34234 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 P
Name SVEKIS, VALD
Address 406 WOODLAND DR
City-State-Zip: SARASOTA FL 34234

Title VP
Name MORRISS, DAVID
Address 4900 BRYWILL CIRCLE
City-State-Zip: SARASOTA FL 34234

Title T
Name CANNON, KITTY
Address 2920 BAYSHORE CIRCLE
City-State-Zip: SARASOTA FL 34234

Title S
Name HOYT-MILLER, DARIAN
Address 5301 STEVENS DR
City-State-Zip: SARASOTA FL 34234

Title DIRECTOR
Name DE QUESADA, CARLOS
Address 412 SOUTH SHORE DRIVE
City-State-Zip: SARASOTA FL 34234

Title DIRECTOR
Name FARR, DON
Address 3301 BAY SHORE RD.
City-State-Zip: SARASOTA FL 34234

Title DIRECTOR
Name JOANNE, GONET
Address 3617 IROQUOIS DRIVE
City-State-Zip: SARASOTA FL 34234

Title DIRECTOR
Name HERMANSEN, JOHN
Address 2833 BAY SHORE CIRCLE
City-State-Zip: SARASOTA FL 34234

Continues on page 2

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: VALD SVEKIS**PRESIDENT****01/09/2013**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name JOHNSON, JANE
Address 405 SAPPHIRE DRIVE
City-State-Zip: SARASOTA FL 34234

Title DIRECTOR
Name SERRIE, GRETCHEN
Address 636 MECCA DRIVE
City-State-Zip: SARASOTA FL 34234

Title DIRECTOR
Name MASON, AMANDA
Address 509 SAPPHIRE DRIVE
City-State-Zip: SARASOTA FL 34234

Title DIRECTOR
Name VERIZZO, PAUL
Address 1008 SYLVAN DRIVE
City-State-Zip: SARASOTA FL 34234