#### 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.

PRESIDENT

SIGNATURE: LINDA SGALLATA

Electronic Signature of Signing Officer/Director Detail

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:

Officer/Director Detail :			
Title	PD	Title	VPD
Name	SGALLATA, LINDA MRS	Name	RIVERA, JANET MRS
Address	246 INDIAN POINT CIRCLE	Address	246 INDIAN POINT CIRCLE
City-State-Zip:	KISSIMMEE FL 34746	City-State-Zip:	KISSIMMEE FL 34746
Title	TD		
Name	PEREZ, ELIZABETH MRS		
Address	246 INDIAN POINT CIRCLE		
City-State-Zip:	KISSIMMEE FL 34746		

SGALLATA, LINDA MRS

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

#### DOCUMENT# N9400002084

Entity Name: INDIAN POINT HOMEOWNERS ASSOCIATION, INC.

#### **Current Principal Place of Business:**

246 INDIAN POINT CIRCLE KISSIMMEE, FL 34746

## **Current Mailing Address:**

246 INDIAN POINT CIRCLE KISSIMMEE, FL 34746 US

### FEI Number: 59-3241931

# Name and Address of Current Registered Agent:

Electronic Signature of Registered Agent

246 INDIAN POINT CIRCLE KISSIMMEE, FL 34746 US

FILED Mar 07, 2020 Secretary of State 2032368683CC

Date

Certificate of Status Desired: No

03/07/2020

Date