

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 708314

1. Entity Name

HOME OWNERS ASSOCIATION OF INDIAN HARBOUR BEACH, INC.

Principal Place of Business

P.O. BOX 372031
INDIAN HARBOUR BEACH FL 32937
US

Mailing Address

P.O. BOX 372031
INDIAN HARBOUR BEACH FL 32937
US

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

6. Name and Address of Current Registered Agent

-BRADLEY, BOB
246 HARBOUR DR E
INDIAN HARBOR BCH FL 32937

7. Name and Address of New Registered Agent

Name

OAKLEY, BETH

Street Address (P.O. Box Number is Not Acceptable)

515 BAHAMA DR.

City

INDIAN HARBOUR BEACH FL

Zip Code

32937

8. 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

Beth Ann Oakley

4/28/02

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
ROTHAMEL, WILLIAM P
527 BAHAMA DR
INDIAN HARBOUR BCH FL 32937 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
OAKLEY, BETH
515 BAHAMA DR.
INDIAN HARBOR BCH. FL 32937 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
P
BRADLEY, ROBERT G
246 HARBOUR DRIVE E
INDIAN HARBOUR BCH FL ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VP
HAYES, NORMAN C
103 ANONA PLACE
INDIAN HARBOR BCH FL ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
HAYES, MARILYN
103 ANONA PLACE
INDIAN HARBOR BCH FL ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
T
SPRING, TRIPP
1127 PINE TREE DR
INDIAN HARBOUR BCH FL 32937 ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
P
Beth Ann Oakley
515 Bahama Dr.
Indian Harbor Beach, FL 32937 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
BRADLEY, ROBERT G
438 CARRIAGE RD
SAFELITE BRANCH FL 32937 ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Beth Ann Oakley

4/28/02

773-3148

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/01)