2000 UNIFORM BUSINESS REPORT (UBR)

1/27/00-90018-001-$61.25-$61.25

DOCUMENT # 729273

1. Entity Name

INDIALANTIC HOMEOWNERS ASSOCIATION, INC.

FILED
00 MAR 13 AM 10:51
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

Principal Place of Business	Mailing Address
P.O. BOX 33335 INDIALANTIC FL 32903	P.O. BOX 33335 INDIALANTIC FL 32903-0335

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 23-7410529 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

ALLEN, JOHN W
1302 S ROMANA AVE
INDIANLANTIC FL 32903

7. Name and Address of New Registered Agent

Name

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

City **FL** Zip Code

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 _____ DATE

Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D HAY, NANCEE 136 TENTH AVE INDIALANTIC FL 32903	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP Hay, Nancee Same as on left.	☒ Change to VP ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S JOSEPH, NAXICY 215 DELAND AVE INDIALANTIC FL	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P Carol Andren 906 S. Ramona INDIALANTIC FL 32903	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T SMELTZER, KATHLEEN 1309 S ROMANA AVE INDIALANTIC FL 32903	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T George Rassweiler 231 Deland Ave Indialantic FL 32903	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D GERGORA, GEORGE 316 DELAND AVE INDIALANTIC FL 32903	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S Lynn Demetriades 1100 S. Riverside Dr Indialantic FL 32903	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP DISHER, RUTH 330 ORMOND AVENUE INDIALANTIC FL 32903	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Matt LaBrutte 310 Melbourne Ave Indialantic, FL 32903	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D GONZALEZ, ADELA 700 WAVECHEST 201 INDIALANTIC FL 32093	☒ Delete OK	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Joyce A. Warner 131 Thirteenth Ave Indialantic, FL 32903	☒ Change ☐ Addition SP

CR2E037 (9/99)

Corrections to mail 00

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: Carol Andren CAROL ANDREN 1-14-00 (321)725-4115

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #