

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 731364

FILED
Jul 25, 2005
Secretary of State

Entity Name: INDIAN SHORES PROPERTY OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

TOWN OF INDIAN SHORES
19305 GULF BLVD.
INDIAN SHORES, FL 33785 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 434
INDIAN ROCKS BEACH, FL 33785 US

New Mailing Address:

FEI Number: 23-7410485 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

DANIEL, NOELLE
14829 GULF BLVD
INDIAN ROCKS BEACH, FL 33785 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SUTCH, STEVE
Address: 19616 GULF BOULEVARD # 101
City-St-Zip: INDIAN SHORES, FL 33785 US

Title: VP () Delete
Name: HOPPE, JANET
Address: 19400 GULF BLVD
City-St-Zip: INDIAN SHORES, FL 33785 US

Title: S () Delete
Name: DANIEL, NOELLE
Address: 19829 GULF BLVD 403
City-St-Zip: INDIAN ROCKS BEACH, FL 33785 US

Title: T () Delete
Name: MILLER, ANNE
Address: 19625 GULF BLVD #1D
City-St-Zip: INDIAN SHORES, FL 33785 US

Title: D (X) Delete
Name: EBSARY, WILLIAM
Address: 19808 GULF BLVD
City-St-Zip: INDIAN ROCKS BEACH, FL 33785 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: ANNE, MILLER
Address: 19526 GULF BLVD #1D
City-St-Zip: INDIAN SHORES, FL 33785 US

Title: VP (X) Change () Addition
Name: JAMIE, NEUMAN
Address: 19111 VISTA BAY DR #697
City-St-Zip: INDIAN SHORES, FL 33785 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: T (X) Change () Addition
Name: STEVE, SUTCH
Address: 19616 GULF BLVD #101
City-St-Zip: INDIAN SHORES, FL 33785 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: NOELLE DANIEL

S

07/25/2005

Electronic Signature of Signing Officer or Director

Date