


# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 13, 2006 8:00 am**  
**Secretary of State**

03-13-2006 90053 043 \*\*\*\*61.25

<b>DOCUMENT # 743034</b>	
1. Entity Name INDIGO UNIT NO. 1 OWNERS ASSOCIATION, INC.	

Principal Place of Business 113 MEADOWBROOK CIRCLE DAYTONA BEACH, FL 32114 US	Mailing Address P.O. BOX 9422 DAYTONA BEACH, FL 32120 US
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2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country



02062006 Chg-NP CR2E037 (11/05)

4. FEI Number 59-2354566		Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent BAGWELL, CARL 113 MEADOWBROOK CIRCLE DAYTONA BEACH, FL 32114		7. Name and Address of New Registered Agent Name <u>A. Paul Greer</u> Street Address (P.O. Box Number is Not Acceptable) <u>105 Spyglass Circle</u> City <u>Daytona Beach</u> FL Zip Code <u>32114</u>	
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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. I am familiar with, and accept the obligations of registered agent.

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

Filing Fee is \$61.25 Due by May 1, 2006	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees	Make check payable to Florida Department of State
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S REYNOLDS, JOYCE 103 PINEHURST CIRCLE DAYTONA BEACH, FL 32114 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD BAGWELL, CARL 113 MEADOWBROOK CIR DAYTONA BEACH, FL 32114 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition D-CARL BAGWELL 113 MEADOWBROOK CIR DAYTONA BEACH FL 32114
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ZAFFUTO, TONY 124 MEADOW BROOK CIRCLE DAYTONA BEACH, FL 32114 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition D RODNEY LOGAN 109 MEADOWBROOK CIR DAYTONA BEACH FL 32114
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T STEVENS, ALTA 104 DUNE CIRCLE DAYTONA BEACH, FL 32114 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD SPRIGGS, ROBERT 111 MEADOWBROOK CIR DAYTONA BEACH, FL 32114 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition VP WILLIAM WALSH 102 AGUSTA CIRCLE DAYTONA BEACH FL 32114
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD GREER, A. PAUL 105 SPY GLASS CIRCLE DAYTONA BEACH, FL 32114 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition OK

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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, without other like empowered.

SIGNATURE: A. Paul Greer 3/9/06 386 233 3429  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #