

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Feb 11, 2008 8:00 am**  
**Secretary of State**

02-11-2008 90055 032 \*\*\*\*61.25

**DOCUMENT # 743034**

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**

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

01092008 Chg-NP CR2E037 (12/06)

4. FEI Number  
**59-2354566**

Applied For  
Not Applicable

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**BAGWELL, CARL  
113 MEADOWBROOK CIRCLE  
DAYTONA BEACH, FL 32114**

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. 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, 2008**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

**Make check payable to  
Florida Department of State**

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**

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

**Robert Spriggs Treas** ☒ Change ☐ Addition

**111 Meadowbrook Circle  
Daytona Beach, FL 32114**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

**DP  
BAGWELL, CARL  
113 MEADOWBROOK CIR  
DAYTONA BEACH, FL 32114**

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

**Zullo, Hildegard** ☐ Change ☒ Addition

**101 Meadowbrook Circle  
Daytona Beach, FL 32114**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

**D  
LOGAN, RODNEY  
109 MEAD BROOK CIR  
DAYTONA BEACH, FL 32114**

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

**DIRECTOR  
JERRY WALKINS  
117 MEADOWBROOK CIR  
DAYTONA BEACH FLA 32114** ☐ Change ☒ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

**T  
STEVENS, ALTA  
104 DUNE CIRCLE  
DAYTONA BEACH, FL 32114**

☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

**VD  
WALSH, WILLIAM  
102 AGUSTA CIR  
DAYTONA BEACH, FL 32114**

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

**D  
REYNOLDS, HARRY  
102 MEADOWBROOK CIRCLE  
DAYTONA BEACH, FL 32114**

☐ Delete

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 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, with all other like empowered.

**SIGNATURE:** *Carl Bagwell* **CARL BAGWELL**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**2-07-08** **386-253-4371**  
Date Daytime Phone #