

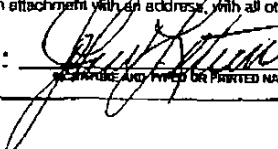


FILED
Apr 24, 2007 8:00 am
Secretary of State

04-24-2007 90020 006 ****61.25

**2007 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # 751165 1. Entity Name INDIAN BEACH VILLAS TWO CONDOMINIUM ASSN., INC.		
Principal Place of Business C/O FIRST CHOICE ASSOCIATION MANAGEMENT 4174 WOODLANDS PARKWAY PALM HARBOR, FL 34685		Mailing Address C/O FIRST CHOICE ASSOCIATION MANAGEMENT 4174 WOODLANDS PARKWAY PALM HARBOR, FL 34685
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent NOLAN, JAMES JR. C/O FIRST CHOICE ASSOC. MANAGEMENT, INC. 4174 WOODLANDS PARKWAY PALM HARBOR, FL 34685		DO NOT WRITE IN THIS SPACE
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:  3/7/07 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent Signature is required when redesignating)</small>		
Filing Fee is \$61.25 Due by May 1, 2007		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May be Added to Fees.
10. OFFICERS AND DIRECTORS		DO NOT WRITE IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P FINAN, PATRICK 2101 GULF BLVD #4A INDIAN ROCKS BEACH, FL 33785	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP CHAVEZ, JOHN 2101 GULF BLVD, #3A INDIAN ROCKS BEACH, FL 33785	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST LETVIN, JOHN 2101 GULF BLVD, #3B INDIAN ROCKS BEACH, FL 33785	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
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:  JOHN LETVIN <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		4/12/07 727-809-5646 <small>Date Daytime Phone #</small>

**2007 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT #751165

1. Entity Name
INDIAN BEACH VILLAS TWO CONDOMINIUM ASSN., INC.



Principal Place of Business
**C/O FIRST CHOICE ASSOCIATION MANAGEMENT
4174 WOODLANDS PARKWAY
PALM HARBOR, FL 34685**

Mailing Address
**C/O FIRST CHOICE ASSOCIATION MANAGEMENT
4174 WOODLANDS PARKWAY
PALM HARBOR, FL 34685**

ATTACHMENT

40079521

DO NOT WRITE IN THIS SPACE

02052007 No Chg-NP CR2E037 (4/06)

4. FEI Number
NOT APPLICABLE

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**NOLAN, JAMES JR.
C/O FIRST CHOICE ASSOC. MANAGEMENT, INC.
4174 WOODLANDS PARKWAY
PALM HARBOR, FL 34685**

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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, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐

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

10. OFFICERS AND DIRECTORS

TITLE
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CITY - ST - ZIP
**P
FINAN, PATRICK
2101 GULF BLVD #4A
INDIAN ROCKS BEACH, FL 33785**

TITLE
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2101 GULF BLVD, #3A
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SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #