2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#753173

FILED Jan 17, 2009 Secretary of State

Entity Name: INDIAN HARBOR CONDOMINIUM ASSOCIATION, INC.

New Principal Place of Business: Current Principal Place of Business: 318-320 WINDRUSH BLVD INDIAN ROCKS BEACH, FL 33785 **Current Mailing Address: New Mailing Address:** 318 WINDRUSH BLVD 384 LENTZ ROAD BELLEAIR BLUFFS, FL 33770 INDIAN ROCKS BEACH, FL 33785 FEI Number: 59-2285174 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: RICKER, SUSAN RICKER, SUSAN 318-320 WINDRUSH BLVD 318 WINDRUSH BLVD INDIAN ROCKS BEACH, FL 33785 US INDIAN ROCKS BEACH, FL 33785 US 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: 01/17/2009 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition KIGGINS, ANTHONY Name: Name: Address: 384 LENTZ ROAD Address: City-St-Zip: BELLEAIR BLUFFS, FL 33770 City-St-Zip: Title: () Delete Title: () Change () Addition Name: RICKER, SUSAN Name: Address: 318 WINDRUSH BLVD. #6 Address: City-St-Zip: INDIAN ROCKS BEACH, FL 33785 City-St-Zip: Title: () Delete Title: () Change () Addition LEVERENZ, DARLENE Name: Name: 320 WINDRUSH BLVD, #9 Address: Address: City-St-Zip: INDIAN ROCKS BEACH, FL 33785 City-St-Zip: Title: () Delete Title: () Change () Addition Name: SWANMAN, KELLEY Name: 320 WINDRUSH BLVD, #7 Address: Address: City-St-Zip: INDIAN ROCKS BEACH, FL 33785 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: SUSAN RICKER PRES 01/17/2009