

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 757019

FILED
May 01, 2008
Secretary of State

Entity Name: INDIAN TRAIL HOMEOWNERS ASSOCIATION INC.

Current Principal Place of Business:

100 INDIAN TRAIL DRIVE
ROYAL PALM BEACH, FL 33411

New Principal Place of Business:

Current Mailing Address:

100 INDIAN TRAIL DRIVE
ROYAL PALM BEACH, FL 33411

New Mailing Address:

FEI Number: 59-2622991 **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:

Name and Address of New Registered Agent:

KLEIN, STUART B.
1551 FORUM PLACE
SUITE 400-B
WEST PALM BEACH, FL 33401 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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VP () Delete
Name: SALASKY, TINA
Address: 44 SEMINOLE CT E
City-St-Zip: ROYAL PALM BEACH, FL 33411

Title: S () Delete
Name: WEISS, SARAH
Address: 15 MAHORIS DRIVE
City-St-Zip: ROYAL PALM BEACH, FL 33411

Title: PD () Delete
Name: LITVIN, GLORIA,
Address: 85 CONASKONK CIR
City-St-Zip: ROYAL PALM BEACH, FL

Title: T () Delete
Name: BLASI, DIANE
Address: 86 CONASKONK CIR
City-St-Zip: ROYAL PALM BEACH, FL

Title: D () Delete
Name: GOULD, MARY ANN
Address: 67 N MAHORIS DRIVE
City-St-Zip: ROYAL PALM BEACH, FL 33411

Title: D () Delete
Name: DIGIACOMO, RALPH
Address: 102 CONGSKONK CIRCLE
City-St-Zip: ROYAL PALM BEACH, FL 33411

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

Title: () Change () Addition
Name:
Address:
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: GLORIA LITVIN

PRES

05/01/2008

Electronic Signature of Signing Officer or Director

Date