

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 757264

**FILED**  
**Mar 02, 2010**  
**Secretary of State**

**Entity Name:** INDIAN PINES CONDOMINIUM ONE ASSOCIATION, INC.

**Current Principal Place of Business:**

3081 SE ASTER LN  
#104  
STUART, FL 34994

**New Principal Place of Business:**

**Current Mailing Address:**

3081 SE ASTER LN  
#104  
STUART, FL 34994

**New Mailing Address:**

**FEI Number:** 59-2196686

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

JOANNE CADREAU, PA  
2229 S. KANNER HIGHWAY  
STUART, FL 34994 US

**Name and Address of New Registered Agent:**

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: PD  
Name: BURKE, ROBERT  
Address: 3081 SE ASTER LANE #103  
City-St-Zip: STUART, FL 34996

Title: STD  
Name: RICHARDS, BETTE  
Address: 3081 SE ASTER LANE #104  
City-St-Zip: STUART, FL 34994

Title: VPD  
Name: BENNETT, NANCY  
Address: 3081 SE ASTER LANE  
City-St-Zip: STUART, FL 34994

I hereby 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 all other like empowered.

SIGNATURE: BETTE RICHARDS

SECY

03/02/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date