

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 MAR 31 PM 3:26

DOCUMENT # 762645 (0)
1. Corporation Name
INDIGO POINT CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business Mailing Address
275 INDIGO DR
STE 312
DAYTONA BEACH FL 32114-1149
US
275 INDIGO DR
STE 312
DAYTONA BEACH FL 32114-1149
US

DO NOT WRITE IN THIS SPACE

3. Date incorporated or Qualified 03/29/1982 3a. Date of Last Report 04/04/1994
4. FEI Number 59-2176034 Applied For Not Applicable

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

6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ \$68.75 Supplemental Fee Not Required

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business 2a. Mailing Address
21 275 Indigo Drive 26 275 Indigo Drive
Suite, Apt. #, etc. Suite, Apt. #, etc.
22 Unit #309 27 Unit #309
City & State City & State
23 Daytona Beach, Florida 28 Daytona Beach, Florida
Zip Country Zip Country
24 32114 25 Volusia 29 32114 30 Volusia

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

DECENSI, PETE
275 INDIGO DR
STE 312
DAYTONA BCH FL 32114

81 Name Jo Anna Moore Simone
82 Street Address (P.O. Box Number is Not Acceptable) 275 Indigo Drive
83 Unit #309
84 City Daytona Beach, FL 85 Zip Code 32114

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0508, Florida Statutes.

SIGNATURE

Jo Anna Moore Simone, Secy/Treasurer

3/5/95

Signature of agent or printed name of registered agent and if not applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD
NAME DECENSI, PETER
STREET ADDRESS 275 INDIGO DR., #312
CITY-ST-ZIP DAYTONA BCH. FL
TITLE VD
NAME PALENCHAR, JOHN
STREET ADDRESS 5 SILVER FOX TRAIL
CITY-ST-ZIP ORMOND BEACH FL
TITLE D
NAME SEAGER, JOYCE
STREET ADDRESS 275 INDIGO DR #307
CITY-ST-ZIP DAYTONA BCH FL
TITLE SD
NAME SALDARIN, WALTER
STREET ADDRESS 275 INDIGO DR., #312
CITY-ST-ZIP DAYTONA, FL 00000
TITLE PD
NAME DECENSI, PETER
STREET ADDRESS 275 INDIGO DRIVE #312
CITY-ST-ZIP DAYTONA BCH. FL
TITLE D
NAME WYLIE, KENNETH
STREET ADDRESS 106 PINEHURST CIRCLE
CITY-ST-ZIP DAYTONA BEACH FL

11 TITLE PD ☒ Change ☐ Addition
12 NAME John Uribe
13 STREET ADDRESS 275 Indigo Drive, Unit #201
14 CITY-ST-ZIP Daytona Beach, Florida
21 TITLE VD ☒ Change ☐ Addition
22 NAME Kenneth Wylie
23 STREET ADDRESS 106 Pinehurst Circle
24 CITY-ST-ZIP Daytona Beach, Florida
31 TITLE S/T/D ☒ Change ☐ Addition
32 NAME Jo Anna Moore Simone
33 STREET ADDRESS 275 Indigo Drive, Unit #309
34 CITY-ST-ZIP Daytona Beach, Florida
41 TITLE D ☒ Change ☐ Addition
42 NAME William Cowhig
43 STREET ADDRESS 275 Indigo Drive, Unit #311
44 CITY-ST-ZIP Daytona, Beach, Florida
51 TITLE D ☒ Change ☐ Addition
52 NAME Rockwell Smith
53 STREET ADDRESS 275 Indigo Drive, Unit #202
54 CITY-ST-ZIP Daytona Beach, Florida
61 TITLE D ☒ Change ☐ Addition
62 NAME Virginia Jennings
63 STREET ADDRESS 275 Indigo Drive, #108
64 CITY-ST-ZIP Daytona Beach, Florida

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for protection under the Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an addition.

SIGNATURE:

Jo Anna Moore Simone
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/5/95

252-0171