2001 UNIFORM BUSINESS REPORT (UBR)

Mar 09, 2001 8:00 am Secretary of State **DOCUMENT # 762645** 1. Entity Name INDIGO POINT CONDOMINIUM ASSOCIATION, INC. 03-09-2001 90497 013 ****61.25 Principal Place of Business Mailing Address 109 MEADOWBROOK CIR 109 MEADOWBROOK CIR DAYTONA BEACH FL 32114 DAYTONA BEACH FL 32114 US 2. Principal Place of Business 3. Mailing Address 275 INDIGO)RIVE DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State 4. FEI Number 59-2176034 BEACH. L)AYTONA Not Applicable \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) O'LEARY, BERNADETTE M 109 MEADOWBROOK CIR DAYTONA BCH FL 32114 Zip Code 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. SIGNATURE DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) Make Check Payable to **FILE NOW:** 9. Election Campaign Financing **\$5.00** May Be Trust Fund Contribution. Added to Fees Department of State FEE IS \$61.25 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. PD Change ☐ Addition ☐ Delete TITI F TITLE DECENSI PETER 275 INDIGO DE #309 DECENSI, PETER NAME NAME 275 INDIGO DR #309 STREET ADDRESS STREET ADDRESS DAYTONA BEACH FL 32114 CITY-ST-ZIP CITY-ST-ZIP DAYTONA BEACH FL 32114 Change ☐ Addition n X Delete TITLE TITLE **NEANS, BILL** NAME NAME STREET ADDRESS 275 INDIGO DRIVE #108 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DAYTONA BEACH FL 32114" Change Addition TSD ☐ Delete TITLE O'LEARY, BERNADETTE M. TITLE O'LEARY, BERISADETTE M NAME NAME IDA WEUVOMBEOON CIECLE 109 MEADOWBROOK CIRCLE STREET ADDRESS STREET ADDRESS DAYTONN BEACH, FL 32114 CITY-ST-ZIP CITY-ST-ZIP DAYTONA BCH FL 32114 ☐ Addition ☐ Change TITLE ☐ Delete TITLE SALDARINI, WALTER NAME NAME STREET ADDRESS 275 INDIGO DRIVE #111 STREET ADDRESS CITY-ST-ZIP DAYTONA BEACH FL 32114 CITY-ST-ZIP Change ☐ Addition TITLE ☐ Delete COMHIE, MITTIAM COWHIG, WILLIAM NAME NAME 275 INDIGO DE #311 DATTONA BEACH PL STREET ADDRESS STREET ADDRESS 275 INDIGO DRIVE #311 CITY-ST-ZIP CITY-ST-ZIP DAYTONA BEACH FL 32114 Addition | ☐ Change TITLE ☐ Delete TITLE IJ KOMLENIC, GEORGE NAME NAME STREET ADDRESS

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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, BERNADETTE M. O'LEARY

CITY-ST-ZIP

DAYTONA BEACH

STREET ADDRESS

CITY-ST-ZIP

FILED