2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 762645

City-St-Zip:

Title:

Name:

Address:

City-St-Zip:

DAYTONA BEACH, FL 32114

() Delete

FILED Feb 25, 2009 Secretary of State

Entity Name: INDIGO POINT CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: 275 INDIGO DRIVE DAYTONA BEACH, FL 32114 LIS **Current Mailing Address: New Mailing Address:** P.O BOX 10202 DAYTONA BEACH, FL 32120 US FEI Number: 59-2176034 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: O'LEARY, BERNADETTE M URIBE, SUSAN M 623 CRWON LN 275 INĎIGO DRIVE PORT ORANGE, FL 32127 US **UNIT 201** DAYTONA BEACH, FL 32114 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: SUSAN M. URIBE 02/25/2009 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete ANDONIADES, JORDAN Name: Name: 275 INDIGO DRIVE Address: Address: City-St-Zip: DAYTONA BEACH, FL 32114 City-St-Zip: Title: () Delete Title: () Change () Addition GEROLIMATOS, KOSTAS Name: Name: Address: 275 INDIGO DRIVE Address: City-St-Zip: DAYTONA BEACH, FL 32114 City-St-Zip: Title: () Delete Title: (X) Change () Addition KOMLENIC, GEORGE Name: URIBE, SUSAN M Name: 275 INDIGO DRIVE 275 INDIGO DRIVE Address: Address: City-St-Zip: DAYTONA BEACH, FL 32114 City-St-Zip: DAYTONA BEACH, FL 32114 Title: () Delete Title: (X) Change () Addition Name: SIMONE, JO ANNA M Name: SIMONE, JO ANNA M 275 INDOGO DRIVE 275 INDIGO DRIVE Address: Address: City-St-Zip: DAYTONA BEACH, FL 32114 City-St-Zip: DAYTONA BEACH, FL 32114 Title: () Delete Title: (X) Change () Addition SWEENEY, WILLIAM SWEENEY, WILLIAM Name: Name: 275 INDIGO DRIVE 275 INDIGO DRIVE Address: Address:

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.

City-St-Zip:

Title:

Name:

Address:

City-St-Zip:

DAYTONA BEACH, FL 32114

COTHRAN, FRANCES C

275 INDIGO DRIVE DAYTONA BEACH, FL 32114

() Change (X) Addition

SIGNATURE: SUSAN M. URIBE PRES 02/25/2009