2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#762909

FILED Apr 27, 2009 Secretary of State

Entity Name: INDIAN CREEK PHASE III B HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:				New Principal Place of Business:		
196 BENT / JUPITER, F	ARROW DR. FL 33458					
Current Mailing Address:				New Mailing Address:		
P.O. BOX 1 JUPITER, F						
FEI Number:	59-2389057	FEI Number Applied For ()	FEI Nun	nber Not Appli	icable () Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:						
SELZ, STEVEN 500 UNIVERSITY DR. STE 110 JUPITER, FL 33458 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:						
	Electro	nic Signature of Registered Age	∍nt		Date	
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	PD (FRANGIAMON 196 BENT ARF JUPITER, FL	ROW DR.		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	TD (COLOMBO, RO 181 BENT ARE JUPITER, FL	ROW DRIVE		Title: Name: Address: City-St-Zip:	() Change() Addition	
Title: Name: Address: City-St-Zip:	SD (GILBERT, ERI 105 DOE TRAI JUPITER, FL	L		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VPD (ROYCE, CHRI 135 DOE TRAI JUPITER, FL	L		Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	D (GREENWOOD 111 DOE TRAI JUPITER, FL	L		Title: Name: Address: City-St-Zip:	D (X) Change () Addition AGRE, ROSLYN 165 BENT ARROW DIVE JUPITER, FL 33458	

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: ROSE COLOMBO TREA 04/27/2009