

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 762963

FILED
Mar 03, 2010
Secretary of State

Entity Name: INTRACOASTAL VILLAS' HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

3333 S. RIDGEWOOD AVENUE
PORT ORANGE, FL 32129

New Principal Place of Business:

Current Mailing Address:

C/O ALL FLORIDA GMAC REAL ESTATE, INC.
152 RIDGEWOOD AVENUE
HOLLY HILL, FL 32117

New Mailing Address:

FEI Number: 59-2877211 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

ALL FLORIDA GMAC REAL ESTATE, INC.
152 RIDGEWOOD AVENUE
HOLLY HILL, FL 32117 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: P
Name: JACKSON, JOHN
Address: 3626 DONNA STREET
City-St-Zip: PORT ORANGE, FL 32129

Title: VP
Name: LAFRINERE, JACKIE
Address: 3333 SOUTH RIDGEWOOD AVENUE #2
City-St-Zip: PORT ORANGE, FL 32129

Title: TD
Name: BAXTER, AARON J
Address: 3333 SOUTH RIDGEWOOD AVE. #14
City-St-Zip: PORT ORANGE, FL 32129

Title: S
Name: WILSON, WILLIAM R
Address: 10054 HECKSCHER DRIVE
City-St-Zip: JACKSONVILLE, FL 32226

Title: D
Name: BURTON, TOMMY
Address: 842 CHICKADEE DRIVE
City-St-Zip: PORT ORANGE, FL 32127

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: MARISA A. RAINS

CAM

03/03/2010

_____ Electronic Signature of Signing Officer or Director

_____ Date