


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 30, 2007 8:00 am
Secretary of State

03-30-2007 90126 050 ****61.25

DOCUMENT # 768407 1. Entity Name INDIAN CREEK PARK HOMEOWNERS ASSOCIATION, INC.	
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Principal Place of Business C/O WILLIAM J. GENTZSCH FT MEYERS FL 33931 US	Mailing Address 6 HOPI LN FT MEYERS FL 33931 US
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2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.

1st MOORE CR2E037 (10/06)

City & State	City & State	4. FEI Number 65-0176817	Applied For Not Applicable
Zip	Country	Zip	Country

5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent
GENTZSCH, WILLIAM J 6 HOPI LN FT MEYERS BEACH FL 33931

7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
City
FL
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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**FILE NOW: FEE IS \$61.25
Due By May 1, 2007**

9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees
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**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS	
TITLE	P <input checked="" type="checkbox"/> Delete
NAME	DEEDS, LARRY
STREET ADDRESS	24 ONEIDA DR NORTH
CITY - ST - ZIP	FORT MYERS BEACH FL 33931
TITLE	<input type="checkbox"/> Delete
NAME	GIONET, NIRMAN
STREET ADDRESS	14 MOWHAWK DR
CITY - ST - ZIP	FT MEYERS BCH FL 33931
TITLE	<input type="checkbox"/> Delete
NAME	GENTZSCH, WILLIAM J
STREET ADDRESS	6 HOPI LN
CITY - ST - ZIP	FORT MYERS BEACH FL 33931
TITLE	<input type="checkbox"/> Delete
NAME	BRITAIN, DENNIS
STREET ADDRESS	25 IROQUOIS DR N
CITY - ST - ZIP	FORT MYERS BEACH FL 33931
TITLE	<input type="checkbox"/> Delete
NAME	MITCHELL, BRUCE
STREET ADDRESS	20 IROQUOIS DR S
CITY - ST - ZIP	FORT MYERS BEACH FL 33931
TITLE	<input type="checkbox"/> Delete
NAME	JACQUES, DOUG
STREET ADDRESS	10 ONEIDA DR
CITY - ST - ZIP	FORT MYERS BEACH FL 33931

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	V P BAYER, GREG
STREET ADDRESS	46 AZTEC CIRCLE
CITY - ST - ZIP	FT. MYERS BEACH, FL 33931
TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	SEC BELOW, NANCY
STREET ADDRESS	3 AZTEC CIRCLE
CITY - ST - ZIP	FT MYERS BEACH, FL 33931
TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	GEHA, ANA MARIE
STREET ADDRESS	1035 ONANDAGA LN.
CITY - ST - ZIP	FT MYERS BEACH, FL 33931
TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	STEANS, HOWARD
STREET ADDRESS	11 KIOWA DR
CITY - ST - ZIP	FT. MYERS BEACH, FL 33931
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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.

SIGNATURE: William J Gentzsch *[Signature]* 3/19/07 739 466 5 745

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #