

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 05, 2006 8:00 am
Secretary of State

04-05-2006 90153 029 ***150.00

DOCUMENT # F15796
 1. Entity Name
INDIANWOOD DEVELOPEMENT CORPORATION



Principal Place of Business Mailing Address
 14574 S.W. RAKE DRIVE 14574 S.W. RAKE DRIVE
 P.O. BOX 335 P.O. BOX 335
 INDIANTOWN, FL 34956 INDIANTOWN, FL 34956

50009146



02152006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number Applied For
 59-2253258 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 ROBINSON, BARNETT J P.A.
 120 E. PALMETTO PARK RD., STE 150
 BOCA RATON, FL 33432

DO NOT WRITE IN THIS SPACE

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD LARGAY, CHARLES E 9401 NW 106TH ST., STE 101 MEDLEY, FL 33178
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP / <i>Asst. Secretary</i> SILLS, RICHARD I. PGA NATL 17 COMMODORE PL PALM BCH GARDENS, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST LARGAY, CHARLES E JR 9401 NW 106TH ST. STE 101 MEDLEY, FL 33178
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 607, 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: *Richard I. Sils* 3/30/06 772-597-3791
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #