

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # F50659

(4)

1. Corporation Name

INDIGO LAKES REALTY, INC.



Principal Place of Business

Mailing Address

149-C SO RIDGEWOOD AVENUE  
P.O. BOX 10809  
DAYTONA BEACH FL 32120-0809  
US

149-C SO RIDGEWOOD AVENUE  
P.O. BOX 10809  
DAYTONA BEACH FL 32120-0809  
US

3. Date Incorporated or Qualified  
10/22/1981

3a. Date of Last Report  
03/01/1995

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

25 Country

28 Zip

30 Country

4. FEI Number

59-2174065

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

LAGONI, PATRICIA  
149-C S RIDGEWOOD AVENUE  
DAYTONA BEACH FL 32114

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME  
DP  
TEETERS, BRUCE W.  
149 CS RIDGEWOOD AVE  
DAYTONA BEACH FL

TITLE ☐ DELETE

NAME  
V  
MCMUNN, WILLIAM H.  
149-C S. RIDGEWOOD AVE.  
DAYTONA BCH. FL

TITLE ☐ DELETE

NAME  
V  
APGAR, ROBERT F.  
149-C S. RIDGEWOOD AVE.  
DAYTONA BCH. FL

TITLE ☐ DELETE

NAME  
T  
MOOTHART, GARY J.  
149-C S. RIDGEWOOD AVE.  
DAYTONA BEACH FL

TITLE ☐ DELETE

NAME  
D  
ALLEN, BOB D.  
608 JOHN ANDERSON DRIVE  
ORMOND BCH FL

TITLE ☐ DELETE

NAME  
VSD  
LAGONI, PATRICIA  
131 MUIRFIELD DRIVE  
DAYTONA BEACH FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Patricia Lagoni*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Patricia Lagoni, VP&Sec. 2/23/96 904-255-7558  
Date Daytime Phone #

CR2E034 (12/95)