## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F95000006050

Entity Name: INDIAN ACQUISITION, INC.

RINGBLOOM, DARLENE

WILLOWBROOK, IL 60521

760 N. FRONTAGE RD

Name:

Address:

City-St-Zip:

FILED Jan 05, 2006 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 760 N. FRONTAGE RD SUITE 101 WILLOWBROOK, IL 60521 **New Mailing Address: Current Mailing Address:** 760 N. FRONTAGE RD SUITE 101 WILLOWBROOK, IL 60521 FEI Number: 36-3918652 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: RINGBLOOM, K. 399 GULF SHORE BLVD S NAPLES, FL 34102 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 Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete Title: () Change () Addition RINGBLOOM, KENNETH R Name: Name: 760 N. FRONTAGE RD Address: Address: City-St-Zip: WILLOWBROOK, IL 60521 City-St-Zip: Title: SD () Delete Title: () Change () Addition Name: MORRIS, KIMBERLY Name: 760 N. FRONTAGE RD Address: Address: WILLOWBROOK, IL 60521 City-St-Zip: City-St-Zip: Title: Title: ( ) Delete () Change () Addition GRAY, LISA Name: Name: 760 N. FRONTAGE RD Address: Address: City-St-Zip: WILLOWBROOK, IL 60521 City-St-Zip: Title: ( ) Delete Title: () Change () Addition

I hereby certify that the information supplied with this filing does not qualify for the 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

Name:

Address:

City-St-Zip:

SIGNATURE: KENNETH R. RINGBLOOM PD 01/05/2006