

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 05, 2001 8:00 am
Secretary of State

03-05-2001 90321 030 ***150.00

DOCUMENT # L04124

1. Entity Name

INDIES LANDING, INC.

Principal Place of Business

**515 PARK AVENUE, NORTH
BRANDYWINE SQUARE #116
WINTER PARK FL 32789**

Mailing Address

**515 PARK AVENUE, NORTH
BRANDYWINE SQUARE #116
WINTER PARK FL 32789**

2. Principal Place of Business

1611 Walnut Avenue

Suite, Apt. #, etc.

3. Mailing Address

1611 Walnut Avenue

Suite, Apt. #, etc.

City & State

Winter Park, FL

City & State

Winter Park, FL

4. FEI Number

59-2960897

Applied For

Not Applicable

Zip

32789

Country

USA

Zip

32789

Country

USA

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**BURST, ANNE YATES
515 PARK AVE. NORTH
BRANDYWINE SQUARE #116
WINTER PARK FL 32789**

7. Name and Address of New Registered Agent

Name **(Same) Burst, Anne Yates**

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

1611 Walnut Avenue

City

Winter Park

FL

Zip Code

32789

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.

SIGNATURE

[Signature] - CEO

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

(NOTE: Registered Agent signature required when reinstating)

DATE

01-09-01

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State**

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE **V** ☐ Delete
NAME **BURST, LAURA A.**
STREET ADDRESS **1101 PALMER AVENUE**
CITY-ST-ZIP **WINTER PARK FL**

TITLE **CEO** ☐ Delete
NAME **BURST, ANNE YATES**
STREET ADDRESS **1101 PALMER AVENUE**
CITY-ST-ZIP **WINTER PARK FL**

TITLE **P** ☐ Delete
NAME **BURST, CATHERINE K.**
STREET ADDRESS **1101 PALMER AVE**
CITY-ST-ZIP **WINTER PARK FL**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
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NAME
STREET ADDRESS
CITY-ST-ZIP

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

[Signature] LAURA BURST

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

1-9-01

Daytime Phone #

740-8444

CR2E034 (10/00)