

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Jan 27, 2003 8:00 am**  
**Secretary of State**

01-27-2003 90332 023 \*\*\*158.75

**DOCUMENT # M74751**

1. Entity Name

INDIGO DEVELOPMENT INC.



Principal Place of Business

P.O. BOX 10809  
DAYTONA BEACH FL 32120-0809

Mailing Address

P.O. BOX 10809  
DAYTONA BEACH FL 32120-0809

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2911284

Applied For

Not Applicable

5. Certificate of Status Desired



**\$8.75** Additional  
Fee Required

☐ CHECK HERE IF MAKING CHANGES

10015778



## 6. Name and Address of Current Registered Agent

APGAR, ROBERT F.  
149 SOUTH RIDGEWOOD AVENUE  
DAYTONA BEACH FL 32114

## 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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00**

**After May 1, 2003 Fee will be \$550.00**

**Make Check Payable to Florida Department of State**

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  
DV  
TEETERS, BRUCE W.  
149-C S. RIDGEWOOD AVE.  
DAYTONA BEACH FL

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DC  
ALLEN, BOB D.  
149-C S. RIDGEWOOD AVE.  
DAYTONA BEACH FL

☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
AS  
CRISP, LINDA.  
149-C S. RIDGEWOOD AVE.  
DAYTONA BEACH FL

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
PD  
MCMUNN, WILLIAM H.  
149-C S. RIDGEWOOD AVE.  
DAYTONA BCH FL

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
V  
APGAR, ROBERT F  
149-C S. RIDGEWOOD AVENUE  
DAYTONA BEACH FL

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Delete

## 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
T  
Moothart, Gary  
149 S. Ridgewood Ave.  
Daytona Beach, FL 32114

☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
S

☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
VASD

☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
V  
Benedict, Joseph III  
149 S. Ridgewood Ave.  
Daytona Beach, FL 32114

☐ Change ☒ Addition

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** *Signature Required* Secretary

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

386-255-7558

Daytime Phone #

CR2E034 (10/02)