

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 10, 1994.
 AMOUNT DUE ON (OR BEFORE 2/1/94) 1994 (IF CHECKS NOT MAILED) AMOUNT DUE TO REINSTATE: \$375

APPROVED AND FILED

94 AUG -5 AM 9:49

SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

CORPORATION
 ANNUAL REPORT
 1994



FLORIDA DEPARTMENT OF STATE
 ANNUAL REPORT
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # **N02838 (3)**

1. Corporation Name
INDIAN CREEK PARK RESIDENTS' ASSOCIATION, INC.

Mailing Address: **17340 SAN CARLOS BLVD. P.O. BOX 631 FT MYERS BEACH FL 33991**
 Principal Place of Business: **17340 SAN CARLOS BLVD. P.O. BOX 631 FT MYERS BEACH FL 33991**

(DO NOT WRITE IN THIS SPACE)

3. Date Incorporated or Qualified: **05/01/1984** 3a. Date of Last Report: **03/19/1993**
 4. FEI Number: **59-2338863** Applied For: Not Applicable
 5. Certificate of Status Desired: **\$8.75 Additional Fee Required**
 6. Filing of Corporate Financial Statements: **\$5.00 May Be Added to Fees**
 7. Nonprofit with IRS 501(c)(3) Tax Exempt Status:
 8. This corporation has liability for intangible tax under § 199.0337, Florida Statutes: Yes No

2. Mailing Address: **21 17340 SAN CARLOS BL** 2a. Principal Place of Business: **2a 17340 SAN CARLOS BL**
 Suite/Apt. #, etc.: **22** Suite/Apt. #, etc.: **27**
 City & State: **23 Fort Myers Beach FL** City & State: **26 Fort MYERS Beach FL**
 Zip: **24 33981** Country: **25 U.S.A.** Zip: **29 33981** Country: **30 U.S.A.**

9. Name and Address of Current Registered Agent
**SHAW, REX
 17340 SAN CARLOS BLVD.
 P.O. BOX 631
 FT MYERS FL 33991**

10. Name and Address of New Registered Agent
**81 Name: DON SEMANS
 82 Street Address (P.O. Box Number, if Not Applicable): 17340 SAN CARLOS BL
 83
 84 Fort MYERS Beach FL 85 33991**

11. Pursuant to the provisions of Sections 607.0502 and 607.1508 or Sections 617.0502 and 617.1508, Florida Statutes, the above named corporation certifies 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 607.0508 or 617.0508 of the Florida Statutes.
 SIGNATURE: **Don Semans** **Don Semans** **PRESIDENT** **7/31/94**

12. OFFICERS AND DIRECTORS

11 TITLE	P/D
12 NAME	SHAW, REX
13 STREET ADDRESS	17340 SAN CARLOS BLVD.
14 CITY ST ZIP	FT MYERS BEACH FL
21 TITLE	V/D
22 NAME	SCHNEIDERMAN, HAROLD
23 STREET ADDRESS	17340 SAN CARLOS BLVD.
24 CITY ST ZIP	FT MYERS BEACH FL
31 TITLE	T/D
32 NAME	GRAPES, JOSEPH
33 STREET ADDRESS	17340 SAN CARLOS BLVD.
34 CITY ST ZIP	FT MYERS BEACH FL
41 TITLE	S/D
42 NAME	YOUNG, VY
43 STREET ADDRESS	17340 SAN CARLOS BLVD.
44 CITY ST ZIP	FT MYERS BEACH FL
51 TITLE	V/D
52 NAME	COX, CHARLES
53 STREET ADDRESS	17340 SAN CARLOS BLVD
54 CITY ST ZIP	FT MYERS BEACH FL
61 TITLE	
62 NAME	
63 STREET ADDRESS	
64 CITY ST ZIP	

13. CHANGES TO OFFICERS AND DIRECTORS

11 TITLE	P/D
12 NAME	SEMANS DON
13 STREET ADDRESS	17340 SAN CARLOS BLVD
14 CITY ST ZIP	Fort MYERS Beach FL 33991
21 TITLE	V/D
22 NAME	STEVES HORACE M.
23 STREET ADDRESS	17340 SAN CARLOS BLVD
24 CITY ST ZIP	Fort MYERS Bch FL 33991
31 TITLE	T/D
32 NAME	SCOTT RICHARD
33 STREET ADDRESS	17340 SAN CARLOS BLVD
34 CITY ST ZIP	Fort MYERS Beach FL 33991
41 TITLE	S/D
42 NAME	CARPENTER, MARY JANE
43 STREET ADDRESS	17340 SAN CARLOS BLVD
44 CITY ST ZIP	Fort MYERS BEACH FL 33991
51 TITLE	V/D
52 NAME	YOUNG VY
53 STREET ADDRESS	17340 SAN CARLOS BLVD
54 CITY ST ZIP	Fort MYERS BEACH FL 33991
61 TITLE	
62 NAME	
63 STREET ADDRESS	
64 CITY ST ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not apply for the exemption of liability as provided in Section 607.0508 or 617.0508 of the Florida Statutes. I further certify that the information included on this annual report or supplemental annual report is true and accurate and that my signature shall be a true and correct representation of the information contained therein. I am an officer or director of the corporation or the owner or business operator who made this report as required by Chapter 607 or Chapter 617 of the Florida Statutes, and that my name appears in Block 12 or Block 13 of this report, or on an attached form with an address.

SIGNATURE: **Richard Scott Pishner Scott per Joseph** **7/31/94** **1-607-723-3451**
IRBASVRA **1-201-384-5845**
 0105002