2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02838

FILED Feb 14, 2009 Secretary of State

Entity Name: INDIAN CREEK PARK RESIDENTS' ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: 17340 SAN CARLOS BOULEVARD FORT MYERS BEACH, FL 33931 US **Current Mailing Address: New Mailing Address:** 596 SIOUX FORT MYERS BEACH, FL 33931 US FEI Number: 59-2338863 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: CROWLY, JOHN 188 TUSCARORA TR. FORT MYERS BEACH, FL 33931 US 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 **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change () Addition PETERSON, AUDREY E MILLER, BETSEY M Name: Name: 765 CHIPPEWA TRAIL Address: 777 CHIPPEWA TRAIL Address: City-St-Zip: FORT MYERS BEACH, FL 33931 City-St-Zip: FORT MYERS BEACH, FL 33931 Title: () Delete Title: () Change () Addition ROUSSEAU, LEO Name: Name: Address: 329 WINNEBAGO Address: City-St-Zip: FORT MYERS BEACH, FL 33931 City-St-Zip: Title: () Delete Title: (X) Change () Addition WEILER, RICH WEILER, RICH Name: Name: Address: 419 UMATILLA TRAIL Address: 419 UMATILLA TRAIL City-St-Zip: FT MYERS BEACH, FL 33931 City-St-Zip: FT MYERS BEACH, FL 33931 Title: () Delete Title: () Change () Addition Name: DEVOSS, ROBERTA Name: Address: 596 SIOUX Address: City-St-Zip: FORT MYERS BEACH, FL 33931 City-St-Zip: Title: () Delete Title: () Change () Addition WHEAT, MORRIS Name: Name: 773 CHIPPEWA TRAIL Address: Address: City-St-Zip: FORT MYERS BEACH, FL 33931 City-St-Zip: Title: () Delete Title: (X) Change () Addition QUATAERT, PHIL DILLAWAY, DON Name: Name: Address: 198 TUSCARORA TR. Address: 422 UMATILLA FORT MYERS BEACH, FL 33931 FORT MYERS BEACH, FL 33931 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DON DILLAWAY D 02/14/2009