

**2012 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED  
Apr 19, 2012  
Secretary of State**

DOCUMENT# N03000002402

**Entity Name:** INDIAN SHORES HOMEOWNERS' ASSOCIATION OF CLERMONT, INC.**Current Principal Place of Business:**1613 OAK HOLLOW RD.  
CLERMONT, FL 34711**New Principal Place of Business:**2021 13TH STREET  
SAINT CLOUD, FL 34769**Current Mailing Address:**P.O. BOX 120823  
CLERMONT, FL 34712**New Mailing Address:**2021 13TH STREET  
SAINT CLOUD, FL 34769**FEI Number:** 14-1876932**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**GERACI, ANITA R ESQ  
15060 BLOXAM AVENUE  
CLERMONT, FL 34711 US**Name and Address of New Registered Agent:**MARTINEZ, DONNIE  
2021 13TH STREET  
SAINT CLOUD, FL 34769 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: DONNIE MARTINEZ

04/19/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: WHIDDEN, DANA  
Address: 2021 13TH STREET  
City-St-Zip: SAINT CLOUD, FL 34769

Title: VPD  
Name: DELAP, JAMES  
Address: 2021 13TH STREET  
City-St-Zip: SAINT CLOUD, FL 34769

Title: STD  
Name: IZZO, MARILYN  
Address: 2021 13TH STREET  
City-St-Zip: SAINT CLOUD, FL 34769

I hereby 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 all other like empowered.

SIGNATURE: DONNIE MARTINEZ

LCAM

04/19/2012

Electronic Signature of Signing Officer or Director

Date