2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03865

FILED Sep 07, 2006 Secretary of State

Entity Name: INDIAN CREEK PHASE IX HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:		New Principal Place of Business:	
	DERING TRAIL FL 33458		
Current Mailing Address:		New Mailing Address:	
	DERING TRAIL FL 33458		
n accordar	: 59-2811870 FEI Number Applied For() FEI ce with s. 607.193(2)(b), F.S., the corporation did not rece I Address of Current Registered Agent:	-	() Certificate of Status Desired () ress of New Registered Agent:
vaille allu	Address of Carrent Registered Agent.	Name and Addi	ess of New Registered Agent.
221 WANI	KI, ANNETTE DERING TRAIL FL 33458 US		
	e named entity submits this statement for the purpose of Florida.	se of changing its reg	istered office or registered agent, or both,
SIGNATU	RE:		
	EL		<u> </u>
	Electronic Signature of Registered Agent		Date
OFFICER	S AND DIRECTORS:	ADDITIONS/CH	Date ANGES TO OFFICERS AND DIRECTORS
ītle: lame: \ddress:		ADDITIONS/CH Title: Name: Address: City-St-Zip:	
Fitle: Name: Address: City-St-Zip: Fitle: Name: Address:	S AND DIRECTORS: D () Delete RICHARDSON, BRIAN 133 WANDERING TR	Title: Name: Address:	ANGES TO OFFICERS AND DIRECTORS
DFFICER Fitle: Name: Address: Dity-St-Zip: Fitle: Name: Address: Dity-St-Zip: Fitle: Name: Address: Dity-St-Zip: Olty-St-Zip: Address: Dity-St-Zip:	D () Delete RICHARDSON, BRIAN 133 WANDERING TR JUPITER, FL 33458 D () Delete EVERLY, TODD 162 WANDERING TRAIL	Title: Name: Address: City-St-Zip: Title: Name: Address:	ANGES TO OFFICERS AND DIRECTORS () Change () Addition
Title: Name: Address: Dity-St-Zip: Title: Name: Address: Dity-St-Zip: Title: Name: Name: Name: Name: Name:	D () Delete RICHARDSON, BRIAN 133 WANDERING TR JUPITER, FL 33458 D () Delete EVERLY, TODD 162 WANDERING TRAIL JUPITER, FL 33458 D () Delete MURASZKIN, MICHELE 133 WANDERING TRAIL	Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: Address:	ANGES TO OFFICERS AND DIRECTORS () Change () Addition () Change () Addition

I hereby certify that the information supplied with this filing does not qualify for the 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: ANNETTE MAJEWSKI D 09/07/2006