

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000010802

FILED  
Apr 20, 2005  
Secretary of State

**Entity Name:** THE HOUSES OF INDIAN BEACH ASSOCIATION, INC.

**Current Principal Place of Business:**

513 CENTRAL AVE 2ND FLOOR  
SARASOTA, FL 34236

**New Principal Place of Business:**

**Current Mailing Address:**

513 CENTRAL AVE 2ND FLOOR  
SARASOTA, FL 34236

**New Mailing Address:**

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

BALL, DANIEL P  
513 CENTRAL AVE 2ND FLOOR  
SARASOTA, FL 34236 US

**Name and Address of New Registered Agent:**

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:**

Title: DP ( ) Delete  
Name: BALL, DANIEL P  
Address: 513 CENTRAL AVE 2ND FLOOR  
City-St-Zip: SARASOTA, FL 34236

Title: DT ( ) Delete  
Name: CARLISLE, RICHARD  
Address: 1377 FIFTH STREET  
City-St-Zip: SARASOTA, FL 34236

Title: DS ( ) Delete  
Name: PETERSON, GUY W  
Address: 1234 FIFTH STREET  
City-St-Zip: SARASOTA, FL 34236

Title: DV ( ) Delete  
Name: ROOKS, HOWARD  
Address: 1003 WESTWAY DRIVE  
City-St-Zip: SARASOTA, FL 34236

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: DANIEL P. BALL

DP

04/20/2005

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date