

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000011511

FILED  
Apr 09, 2009  
Secretary of State

**Entity Name:** INTERCOASTAL POINTE CONDOMINIUM OWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

1365 HWY 98 E  
MARY ESTHER, FL 32569

**New Principal Place of Business:**

**Current Mailing Address:**

P.O BOX 242  
MARY ESTHER, FL 32569

**New Mailing Address:**

**FEI Number:** 20-2848914

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

RDF ASSOCIATES, INC  
29-C MIRACLE STRIP PKWY SW  
FT. WALTON BCH, FL 32548 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: DV ( ) Delete  
Name: CRIDER, DON  
Address: 1365 W HWY 98 507  
City-St-Zip: MARY ESTHER, FL 32569

Title: DT ( ) Delete  
Name: DONNELLY, TOM  
Address: 1365 W HWY 98 502  
City-St-Zip: MARY ESTHER, FL 32569

Title: SEC ( ) Delete  
Name: GREEN, PAM  
Address: 1365 HWY 98 E #101  
City-St-Zip: MARY ESTHER, FL 32569

Title: DP ( ) Delete  
Name: GEISLER, DANNY  
Address: 1365 W HWY 98 402  
City-St-Zip: MARY ESTHER, FL 32569

Title: D ( ) Delete  
Name: WINFREE, AL  
Address: 981-3C  
City-St-Zip: DESTIN, FL 32541

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

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

Title: DST (X) Change ( ) Addition  
Name: DONNELLY, TOM  
Address: 1365 W HWY 98 502  
City-St-Zip: MARY ESTHER, FL 32569

Title: D (X) Change ( ) Addition  
Name: GREEN, DAVID  
Address: 1365 HWY 98 E #101  
City-St-Zip: MARY ESTHER, FL 32569

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

Title: D (X) Change ( ) Addition  
Name: PHILLIPS, CAROL  
Address: 2838 PAR LANE  
City-St-Zip: TALLAHASSEE,, FL 32301

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: ANDREA MCDERMOTT

MGR

04/09/2009

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

\_\_\_\_\_  
Date