


# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 28, 2005 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # N04750</b> 1. Entity Name INDIAN LAKES COMMUNITY ASSOCIATION, INC.	
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Principal Place of Business PO BOX 37427 JAX, FL 32236 US	Mailing Address C/O WILLIAM J. CANELOS PO BOX 37427 JACKSONVILLE, FL 32236 US
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04262005 No Chg-NP CR2E037 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 59-2532318	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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**6. Name and Address of Current Registered Agent**

CANELOS, WILLIAM J  
2905 DOWNING ST.  
JACKSONVILLE, FL 32205

**DO NOT WRITE  
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**Filing Fee is \$61.25  
Due by May 1, 2005**

9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

**10. OFFICERS AND DIRECTORS**

TITLE NAME STREET ADDRESS CITY - ST - ZIP	VD RITZERT, GREGORY 2572 HOLLY POINT RD W ORANGE PARK, FL 32073
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD PISAPIA, ALAN A 4275 HUNTINGTON FRST. JACKSONVILLE, FL 32257
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D EDDY, VIRGINIA P.O. BOX 953 N/A ORANGE PARK, FL 32067
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TSD CANELOS, WILLIAM PO BOX 37427 JACKSONVILLE, FL 32236
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

U00000339476  
04/28/05-80074-013 61.25

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: William J. Canelos 4/26/05 904-363-0911  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #