

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05721

FILED  
Apr 07, 2007  
Secretary of State

**Entity Name:** INDIAN OAKS WEST HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

431 WAVERLY RD  
TALLAHASSEE, FL 32312 US

**New Principal Place of Business:**

**Current Mailing Address:**

431 WAVERLY RD  
TALLAHASSEE, FL 32312 US

**New Mailing Address:**

**FEI Number:** 59-3179117

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ISAACS, DAN LEE  
431 WAVERLY RD  
TALLAHASSEE, FL 32303 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: PST ( ) Delete  
Name: JOYNER, FREDERICK  
Address: 3317 OLD BAINBRIDGE RD  
City-St-Zip: TALLAHASSEE, FL 32303

Title: DP ( ) Delete  
Name: JASEN, LAURA  
Address: 1808-F JACKSON BLUFF  
City-St-Zip: TALLAHASSEE, FL 32304

Title: DVP ( ) Delete  
Name: LEWIS, PETE MR.  
Address: 4595 SCAWTHORN  
City-St-Zip: TALLAHASSEE, FL 32303

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

Title: DP (X) Change ( ) Addition  
Name: JOYNER, FREDERICK MR  
Address: 2000 OLD BAINBRIDGE RD  
City-St-Zip: TALLAHASSEE, FL 32303

Title: DS (X) Change ( ) Addition  
Name: JASEN, LAURA MS  
Address: 1808-F JACKSON BLUFF  
City-St-Zip: TALLAHASSEE, FL 32304

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 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: FREDRICK JOYNER

DP

04/07/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date