2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 23, 2008
Secretary of State

DOCUMENT# N06000005587

Entity Name: INDIANOLA ON THE WATER CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

113 BROOKS ST SE
FT WALTON BCH, FL 32548

New Principal Place of Business:

Current Mailing Address:

215 GRAND BLVD
SUITE 200
MIRAMAR BEACH, FL 32550 US

New Mailing Address:

FEI Number: 20-5116347 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GORMLEY, TERRY P
215 GRAND BLVD
SUITE 200
MIRAMAR BEACH, FL 32550 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: SCOTT, NORMAN B JR.
Address: 812 BENTLEY LN
City-St-Zip: N MYRTLE BCH, SC 29582

Title: DV ( ) Delete
Name: MCMASTER, JAMES R
Address: 655 MCDONOUGH RD
City-St-Zip: HAMPTON, GA 30228

Title: DST ( ) Delete
Name: HEDBERG, RICHARD E
Address: 107 HENRY ST
City-St-Zip: BEAVER DAM, WI 53916

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DVP (X) Change ( ) Addition
Name: SCOTT, NORMAN B JR.
Address: 812 BENTLEY LN
City-St-Zip: N MYRTLE BCH, SC 29582 US

Title: DST (X) Change ( ) Addition
Name: MCMASTER, JAMES R
Address: 655 MCDONOUGH RD
City-St-Zip: HAMPTON, GA 30228 US

Title: DP (X) Change ( ) Addition
Name: DAVIS, DOUGLAS A
Address: 23 E CASA LOMA DR
City-St-Zip: MARY ESTHER, FL 32569 US

Title: D ( ) Change (X) Addition
Name: CHILCOTE, DEBRA
Address: 73 LAKESHORE DR
City-St-Zip: SHALIMAR, FL 32579 US

Title: D ( ) Change (X) Addition
Name: MCMASTER, DENNIS R
Address: 2079 GEORGIA HWY 85
City-St-Zip: SENOIA, GA 30276 US

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: JAMES MCMASTERS S 04/23/2008

Electronic Signature of Signing Officer or Director — Date