

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000005471

FILED  
Mar 30, 2010  
Secretary of State

Entity Name: INGRID'S VILLAGES, INC.

**Current Principal Place of Business:**

2257 WORLD PARKWAY BLVD W.  
61  
CLEARWATER, FL 33763

**New Principal Place of Business:**

2257 WORLD PARKWAY BLVD W.  
61  
CLEARWATER, FL 33763

**New Mailing Address:**

2257 WORLD PARKWAY BLVD W  
61  
CLEARWATER, FL 33763

FEI Number: 26-0239434

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

JONES, THOMAS L  
2259 COSTA RICAN DRIVE APT 1  
CLEARWATER, FL 33763 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: D,P,  
Name: JONES, THOMAS L  
Address: 2259 COSTA RICAN DRIVE APT 1  
City-St-Zip: CLEARWATER, FL 33763

Title: D,VP  
Name: HADLEY-JONES, INGRID K  
Address: 2259 COSTA RICAN DR, APT 1  
City-St-Zip: CLEARWATER, FL 33763

Title: D  
Name: MAKIN, EDWARD  
Address: 1001 STARKEY ROAD # 352  
City-St-Zip: LARGO, FL 33771

Title: D  
Name: POWERS, SHAUN  
Address: 1738 WINFIELD RD N  
City-St-Zip: CLEARWATER, FL 33756

Title: D  
Name: HOOD, CHRISTOPHER  
Address: 5990-54TH AVENUE N  
City-St-Zip: KENNETH CITY, FL 33709

I hereby 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 all other like empowered.

SIGNATURE: THOMAS L. JONES

P, D

03/30/2010

Electronic Signature of Signing Officer or Director

Date