## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N17598

Title:

Name:

Address:

City-St-Zip:

FILED Apr 10, 2006 Secretary of State

Entity Name: INDIAN HILLS PROPERTY OWNERS ASSOCIATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** 17553 SE INDIAN HILLS TEQUESTA, FL 33469 US **Current Mailing Address: New Mailing Address:** 17344 SE CONCH BAR AVE 17320 SE CONCH BAR AVE JUPITER, FL 33469 JUPITER, FL 33469 FEI Number: 65-0068065 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: ARMOUR, ALAN 17553 S.E. INDIAN HILLS DR. TEQUESTA, FL 33469 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Change ( ) Addition () Delete CERTON, EDWARD CORTON, EDWARD Name: Name: 17457 SE INCDIAN HILLS DR Address: 17457 SE INCDIAN HILLS DR Address: City-St-Zip: TEQUESTA, FL 33469 City-St-Zip: TEQUESTA, FL 33469 Title: Title: ( ) Delete () Change () Addition Name: MCROBERTS, VALARIE Name: Address: 17505 SE INDIAN HILLS DR Address: City-St-Zip: JUPITER, FL 33469 City-St-Zip: Title: () Delete Title: (X) Change ( ) Addition COLLOVA, JANET Name: COLLOVA, JANET Name: 17440 SE INDIAL HILLS DR 17440 SE CONCH BAR AVE Address: Address: City-St-Zip: TEQUESTA, FL 33469 City-St-Zip: TEQUESTA, FL 33469

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.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: JANET L COFFEY T 04/10/2006

() Delete

17320 SE CONCH BAR AVE

TEQUESTA, FL 33469

COFFEY, JANET

() Change () Addition