FILED

2001 UNIFORM BUSINESS REPORT (UBR)

Feb 27, 2001 8:00 am Secretary of State **DOCUMENT # N26220** INDIGO PINES CONDOMINIUMS MANAGEMENT ASSOCIATION 02-27-2001 90303 015 ****61.25 Principal Place of Business Mailing Address 101 BENT TREE DRIVE 101 BENT TREE DRIVE #98 DAYTONA BEACH FL 32114-1192 DAYTONA BEACH FL 32114-1192 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-2982404 Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent MENASSA Street Address (P.O. Box Number is Not Acceptable) BOGERT, MARJORIE 47 INLET POINT BLVD PONCE INLET FL 32127 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. SIGNATURE (NOTE: Registered Agent signature required when reinstating) FILE NOW: 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Trust Fund Contribution. П FEE IS \$61.25 Added to Fees **Department of State** 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. TITLE PRESIDENT, IREAS ☐ Delete TITLE Change ☐ Addition MENASSA, BETTY NAME NAME STREET ADDRESS 101 BENT TREE DR STREET ADDRESS DAYTONA BEACH FL CITY-ST-ZIP CITY-ST-7IP TITLE ☐ Delete TITLE Change ☐ Addition MALUCHNIK, PATRICIA NAME NAME 101 BENT TREE DRIVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP DAYTONA BEACH FL-32114 CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition MORRIS, CINDY NAME STREET ADDRESS 101 BENT TREE DRIVE STREET ADDRESS CITY-ST-ZIP DAYTONA BEACH FL CITY-ST-ZIP TITLE 🔀 Delete TITLE Change ☐ Addition **BOGERT, MARJORIE** NAME NAME 47 INLET POINT BLVD. STREET ADDRESS STREET ADDRESS CITY-ST-ZIF PONCE INLET FL 32127 CITY-ST-ZIP TITLE Delete TITLE ☐ Change Addition **BRONSON, BETTY** NAME NAME 101 BENT TREE DR STREET ADDRESS STREET ADDRESS CITY-ST-ZIP DAYTONA BEACH FL 32114 CITY-ST-ZIP BETSY MORRISON 101BENTTREEDR TITLE ☐ Delete TITLE ☐ Change **Addition** NAME NAME STREET ADDRESS STREET ADDRESS DAYTONA BEACH, FL 32111 CITY-ST-7IP CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 Hone ph. 904-274-5102

SIGNATURE: