

2005-NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 21, 2005 8:00 am
Secretary of State

02-21-2005 90082 039 *****61.25

DOCUMENT # N26220

1. Entity Name

INDIGO PINES CONDOMINIUMS MANAGEMENT
ASSOCIATION, INC.



Principal Place of Business

Mailing Address

101 BENT TREE DRIVE
#98
DAYTONA BEACH FL 32114-1192

101 BENT TREE DRIVE
#98
DAYTONA BEACH FL 32114-1192

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country



1st MOORE

CR2E037 (10/04)

4. FEI Number

59-2982404

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

MENASSA, BETTY
101 BENT TREE DRIVE
DAYTONA BEACH FL 32114

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2005

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PT
NAME MENASSA, BETTY
STREET ADDRESS 101 BENT TREE DR
CITY-ST-ZIP DAYTONA BEACH FL ☐ Delete

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE D
NAME MALUCHNIK, PATRICIA
STREET ADDRESS 101 BENT TREE DRIVE
CITY-ST-ZIP DAYTONA BEACH FL 32114 ☐ Delete

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE S
NAME KNOCZOS, JUCTI
STREET ADDRESS 101 BENT TREE DRIVE
CITY-ST-ZIP DAYTONA BEACH FL 32114 ☐ Delete

TITLE JUDI KNOCZOS
NAME ☒ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE VD
NAME BRONSON, BETTY
STREET ADDRESS 101 BENT TREE DR
CITY-ST-ZIP DAYTONA BEACH FL 32114 ☐ Delete

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE S
NAME ROBINSON, ELIZABETH
STREET ADDRESS 101 BENT TREE DR.
CITY-ST-ZIP DAYTONA BEACH FL 32114 ☐ Delete

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
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 with an address, with all other like empowered.

SIGNATURE: Betty Menassa BETTY MENASSA 2/16/05 386-274-4039
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #