2003 NOT-FOR-PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # N27359

1. Entity Name

INDIAN CREEK PHASE VIII HOMEOWNERS ASSOCIATION, INC.



FILED Apr 25, 2003 8:00 am Secretary of State 04-25-2003 90170 021 ****61.25

Principal Place of Business		Mailing Address			14400355		
64 MOCCASIA TRAIL W UPITER FL 33458		PO BOX 1129 JUPITER FL 33458			1000202		
IS S		US		1 (80(1)8) 818 1	1 (BB(1) B) B (18(1) 18889 1518) PH/E 191/ 8/B) B18(1 8/B) 8/B) 8/B) 8/B) 2/B); 179)		
2. Principal Place of Business		3. Mailing Address					
Suite, Apt. #, etc.		Suite, Apt. #, etc.		<u> </u>	CHECK HERE IF MAKING CHANGES		
City & State		City & State		4. FEI Number 6	4. FEI Number 65-0066989 Applied For Not Applicable		
Zip	Country	Zip	Country	Country 5. Certificate of Status Desired Fee Required \$8.75 Additional Fee Required			
Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent			
	I was a summer of any and has been assumed	را المهموم معدد المداوع المداوع		HUAN R PIE	Clwcoz	-	
	E PROPERTY MANAGEMENT			eet Address (P.O. Box Number is Not Acceptable)			
111 EGRI							
JUPITER	FL 33458		City 2	oft ST. LUCIE	FL 396	de	
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 HEAR RECENICZ 3/17/2003							
SIGNATURE Signature, typed or printed name of registered agent and tit if applicable. (NOTE: Registered Agent signature required when reinstating) DATE							
organical special mana or regional agent was regional appropriate in agents of agent agreement remaining.							
9. Election Campaig			paign Financing	\$5.00 May Be	Make Check Payable	e to	
ļ	FILE NOW: FEE IS \$61.25	Trust Fund Co	Trust Fund Contribution.		Florida Department of		
	,		•		TO OSTIGERA AND DIRECTORS		
10.	OFFICERS AND DI		11.	ADDITIONS/CHANG	SES TO OFFICERS AND DIRECTORS	1	
TITLE NAME	GIACCONE, URSULA	☐ Delete	TITLE NAMÉ		Change	☐ Addition	
STREET ADDRESS	108 PALOMINO DR		STREET ADDRESS				
CITY-ST-ZIP	JUPITER FL 33458		CITY-ST-ZIP				
TITLE	PD	Delete	TITLE		☐ Change	Addition	
NAME	GIACCONE, FRANK	•	NAME				
STREET ADDRESS	108 PALOMINO DRIVE		STREET ADDRESS				
CITY-ST-ZIP	JUPITER FL 33458		CITY-ST-ZIP				
TITLE	BROADWELL, JAGE JACK	☐ Delete	TITLE		☐ Change	☐ Addition	
NAME STREET ADDRESS	120 ADOBE CIRCLE		NAME Street Address			[
CITY-ST-ZIP	JUPITER FL 33458		CITY-ST-ZIP				
TITLE	VPD	☐ Delete	TITLE	Ph Ph	Change	☐ Addition	
NAME	MEYBURG, BEN		NAME	MEYBURG REI	ر ب	_	
STREET ADDRESS	110 PALOMINO DRIVE		STREET ADDRESS	110 PALUATINO	DL.	ļ	
CITY-ST-ZIP	JUPITER FL 33458	······································	CITY-ST-ZIP	MEYNER BEI 110 PHUNGING JULIER, FL	3345F		
TITLE	D	☐ Delete	TITLE		Change	☐ Addition	
NAME	ADKIN, BARBARA		NAME				
STREET ADDRESS	120 Palomino DR Jupiter Fl 33458		STREET ADDRESS CITY-ST-ZIP			{	
TITLE	D	□ Delete	TITLE		Change	Addition	
NAME	WIBLE, DOLORES	. Delete	NAME		L_1 change	L Maniford	
STREET ADDRESS	126 PALOMINO DR		STREET ADDRESS	,			
CITY-ST-ZIP	JUPITER FL 33458		CITY-ST-ZIP				
12 I horoby o	actifut that the information aumplied with		Alan auranantian at	stad in Castian 110 07/07/3	levide Statutes I further partifut that the	information	

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 rurtner 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:

4-22-03