

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N30606

FILED  
Apr 06, 2009  
Secretary of State

Entity Name: INDIGO OFFICE PARK OWNERS' ASSOCIATION, INC.

## Current Principal Place of Business:

100 LA COSTA LANE  
STE 140  
DAYTONA BEACH, FL 32114 US

## New Principal Place of Business:

## Current Mailing Address:

100 LA COSTA LANE  
STE 140  
DAYTONA BEACH, FL 32114 US

## New Mailing Address:

FEI Number: 59-2932185

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GLASS, THOMAS G  
100 LA COSTA LN STE 140  
DAYTONA BEACH, FL 32114 US

## Name and Address of New Registered Agent:

GLASS, THOMAS G  
100 LA COSTA LN  
STE 140  
DAYTONA BEACH, FL 32114 US

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:

04/06/2009

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: DEMPSEY, DENNY  
Address: 5901 TIDEWATER DR  
City-St-Zip: JUPITER, FL 33458

Title: STD ( ) Delete  
Name: GLASS, THOMAS G  
Address: 100 LA COSTA LANE STE 140  
City-St-Zip: DAYTONA BEACH, FL 32114

Title: D ( ) Delete  
Name: WALTER, WILLIAM A  
Address: 11 JEFFERSON LANDING  
City-St-Zip: DAYTONA BEACH, FL 32118

Title: D ( ) Delete  
Name: WILSON, LEONA  
Address: 113 EXE. CIR  
City-St-Zip: DAYTONA BEACH, FL 32114

Title: D ( ) Delete  
Name: ZIMMERMAN, DARLA  
Address: 111 EXE. CIR STE A  
City-St-Zip: DAYTONA BEACH, FL 32114

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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.

SIGNATURE: THOMAS G. GLASS

MR.

04/06/2009

Electronic Signature of Signing Officer or Director

Date