

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N46355

FILED
Apr 06, 2009
Secretary of State

Entity Name: INDIGO COVE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

131 INDIGO COVE PLACE
MELBOURNE BEACH, FL 32951 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 510883
MELBOURNE BEACH, FL 329510176

New Mailing Address:

FEI Number: 59-3147413

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

INTILLE, KELLY A
131 INDIGO COVE PLACE
MELBOURNE BEACH, FL 32951 US

Name and Address of New Registered Agent:

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:

Title: DP () Delete
Name: ROBT, INTILLE
Address: 131 INDIGO COVE PL
City-St-Zip: MELBOURNE BEACH, FL 32951

Title: D () Delete
Name: TARANTO, VINCENT
Address: 142 INDIGO COVE PL
City-St-Zip: MELBOURNE BEACH, FL 32951

Title: DVS () Delete
Name: PARSONS, JEFF
Address: 101 INDIGO COVE PL
City-St-Zip: MELBOURNE BEACH, FL 32951

Title: T () Delete
Name: KELLY, INTILLE
Address: 131 INDIGO COVE PLACE
City-St-Zip: MELBOURNE BEACH, FL 32951

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: INTILLE, ROBERT
Address: 131 INDIGO COVE PL
City-St-Zip: MELBOURNE BEACH, FL 32951 US

Title: D (X) Change () Addition
Name: BESSETTE, ROBERT
Address: 102 INDIGO COVE PL
City-St-Zip: MELBOURNE BEACH, FL 32951 US

Title: DVP (X) Change () Addition
Name: PARSONS, JEFF
Address: 101 INDIGO COVE PL
City-St-Zip: MELBOURNE BEACH, FL 32951 US

Title: T (X) Change () Addition
Name: INTILLE, KELLY
Address: 131 INDIGO COVE PLACE
City-St-Zip: MELBOURNE BEACH, FL 32951 US

Title: S () Change (X) Addition
Name: PARSONS, JOANNE
Address: 101 INDIGO COVE PLACE
City-St-Zip: MELBOURNE BEACH, FL 32951 US

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: KELLY A INTILLE

T

04/06/2009

Electronic Signature of Signing Officer or Director

Date