

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 15, 2006 8:00 am
Secretary of State

02-15-2006 90037 006 ****61.25

DOCUMENT # N46929

1. Entity Name

INDIAN SHORES HOMEOWNER'S ASSOCIATION, INC.



Principal Place of Business

P O BOX 182
VALPARAISO FL 32580
US

Mailing Address

PO BOX 182
VALPARAISO FL 32580
US



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 (10/05)

4. FEI Number
59-3143542

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

MCINNIS, C JEFFREY
909 MAR WALT DR
SUITE 1014
FT WALTON BEACH FL 32547

7. Name and Address of New Registered Agent

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, 2006

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

TITLE TD ☐ Delete
NAME CAVERLY, DONALD
STREET ADDRESS 113 CHOCTAW COVE
CITY-ST-ZIP VALPARAISO FL 32580

TITLE VD ☒ Delete
NAME TIPTON, DONALD
STREET ADDRESS 105 AUCILLA COVE
CITY-ST-ZIP VALPARAISO FL 32580

TITLE D ☒ Delete
NAME CRUMP, PETER
STREET ADDRESS 103 SAFE HARBOR
CITY-ST-ZIP VALPARAISO FL 32580

TITLE D ☒ Delete
NAME GARDNER, ALAN
STREET ADDRESS 101 CHOCTAW COVE
CITY-ST-ZIP VALPARAISO FL 32580

TITLE SD ☐ Delete
NAME MCCALL, MARGARET
STREET ADDRESS 380 JASMINE AVE
CITY-ST-ZIP VALPARAISO FL 32580

TITLE PD ☐ Delete
NAME BAKER, MICHAEL
STREET ADDRESS 397 JASMINE AVE
CITY-ST-ZIP VALPARAISO FL 32580

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

TITLE ☐ Change ☒ Addition
NAME ~~DAVD~~ BARNETT, LARRY
STREET ADDRESS 109 ARROW POINT COVE
CITY-ST-ZIP VALPARAISO FL 32580

TITLE ☐ Change ☒ Addition
NAME D MONTAYA, DONNA
STREET ADDRESS 374 JASMINE AVE
CITY-ST-ZIP VALPARAISO FL 32580

TITLE ☐ Change ☒ Addition
NAME D TIPTON, DONALD
STREET ADDRESS 105 AUCILLA COVE
CITY-ST-ZIP VALPARAISO FL 32580

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

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

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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:

C. W. D. McCall

1-31-06

(850) 883-0190