## 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N47511

FILED Mar 15, 2010 Secretary of State

Entity Name: INDIAN BAY ESTATES PHASE II COMMUNITY ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

2180 W SR 434 2180 WEST SR 434

STE 5000 STE 5000

LONGWOOD, FL 32779 US LONGWOOD, FL 32779 US

Current Mailing Address: New Mailing Address:

2180 W SR 434 2180 WEST SR 434

STE 5000 STE 5000

LONGWOOD, FL 32779 US LONGWOOD, FL 32779 US

FEI Number: 59-3165824 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

HART, JAMES W JR SENTRY MANAGEMENT INC 2180 WEST SR 434 SUITE 5000 LONGWOOD, FL 32779 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:

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Title: PD

 Name:
 JONES, ROBIN

 Address:
 550 INDIAN BAY BLVD

 City-St-Zip:
 MERRITT ISLAND, FL 32953

Title: VPD

 Name:
 IACABUCCI, HELEN

 Address:
 560 INDIAN BAY BLVD.

 City-St-Zip:
 MERRITT ISLAND, FL 32953

Title: TD

 Name:
 WILLIAMS, JIM

 Address:
 525 INDIAN BAY BLVD

 City-St-Zip:
 MERRITT ISLAND, FL 32953

Title: ASD

Name: HARRIS, GERRY Address: 635 APACHE TR

City-St-Zip: MERRITT ISLAND, FL 32953

Title: SD

Name: FRAME, REN Address: 505 APACHE TR

City-St-Zip: MERRITT ISLAND, FL 32953

I hereby 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 all other like empowered.

SIGNATURE: ROBIN JONES PD 03/15/2010