


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 14, 2007 8:00 am
Secretary of State

02-14-2007 90059 016 ****61.25

DOCUMENT # N98000004127	
1. Entity Name THE INDIANA SOCIETY OF SOUTHWEST FLORIDA, INC.	

Principal Place of Business 1056 DIAMOND LAKE CIR. NAPLES, FL 34114	Mailing Address 1056 DIAMOND LAKE CIR. NAPLES, FL 34114
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01252007 No Chg-NP CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3527338	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

STRAUSS, JEROME M
1056 DAIMOND LAKE CIR.
NAPLES, FL 34114

**DO NOT WRITE
IN THIS SPACE**

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 _____ DATE _____

Signature typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$61.25 Due by May 1, 2007	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D STRAUSS, JEROME M 1056 DIAMOND LAKE CIRCLE NAPLES, FL 34114
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MEYERS, HARRY E 103 CLUBHOUSE DRIVE #352 NAPLES, FL 34105
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D STRAUSS, SUSAN J 1056 DIAMOND LAKE CIR. NAPLES, FL 34114
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GRAVES, PEGGY 1082 CAMELOT CIRCLE NAPLES, FL 34119
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: Jerome M. Strauss 2/5/07 239-293-8661

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #