2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000006310

FILED Mar 24, 2009 Secretary of State

Entity Name: THE INDIES HOMEOWNER'S ASSOCIATION INC

| Current Principal Place of Business: | | | New Principal Place of Business: | |
|---|---|---|--|---|
| | RPORATE BLVD. NW | • | | |
| #138 BOCA RA | TON, FL 33431 | | | |
| Current M | lailing Address: | | New Mailing A | Address: |
| 2295 COR #138 | RPORATE BLVD. NW | 1 | | |
| | TON, FL 33431 | | | |
| El Number | : 65-0962203 FEI I | Number Applied For() | FEI Number Not Applicab | e () Certificate of Status Desired () |
| Name and | d Address of Curren | t Registered Agent: | Name and Ad | dress of New Registered Agent: |
| WHITE, DONALD 2295 CORPORATE BLVD. NW BOCA RATON, FL 33431 US | | WHITE, DONALD 2295 CORPORATE BLVD. NW #138 BOCA RATON, FL 33431 US | | |
| | e named entity submit e of Florida. | s this statement for the p | ourpose of changing its re | gistered office or registered agent, or both, |
| | | | | |
| SIGNATU | RE: | | | 03/24/2009 |
| SIGNATU | RE: | nature of Registered Age | ent | 03/24/2009 Date |
| SIGNATU OFFICER | RE: | | | |
| OFFICER itle: lame: .ddress: | RE:Electronic Sig | D | | Date |
| DFFICER ittle: lame: .ddress: bity-St-Zip: ittle: lame: .ddress: | RE: Electronic Sig S AND DIRECTORS PD () Delete FETTNER, BRIAN 272 E BOCA RATON R | : D :32 RD. | ADDITIONS/C Title: Name: Address: | Date HANGES TO OFFICERS AND DIRECTO |
| | RE: Electronic Sig S AND DIRECTORS PD () Delete FETTNER, BRIAN 272 E BOCA RATON R BOCA RATON, FL 334 VPD () Delete WOOD, EDWARD 236 E. BOCA RATON F | D 332 RD. 332 | ADDITIONS/C Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: SD Name: MA Address: 280 | Date HANGES TO OFFICERS AND DIRECTOR () Change () Addition () Change () Addition |

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: BRIAN FETTNER PD 03/24/2009