

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 25, 2006 8:00 am
Secretary of State

04-25-2006 90112 004 ****61.25

DOCUMENT # N99000007188					
1. Entity Name INDIGO SHORES AT WEST BAY CLUB CONDOMINIUM ASSOCIATION, INC.					
Principal Place of Business 5070 INDIGO BAY BLVD., #102 ESTERO, FL 33928			Mailing Address 5070 INDIGO BAY BLVD., #102 ESTERO, FL 33928		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 59-3613793	
5. Certificate of Status Desired ☐				Applied For Not Applicable	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
ADAMS, JOSEPH E ESQ. C/O BECKER & POLIAKOFF, P.A. 14240 METROPOLIS AVENUE, SUITE 100 FT. MYERS, FL 33912				Name Street Address (P.O. Box Number is Not Acceptable) City	
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.				FL Zip Code	
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating)					
Filing Fee Is \$61.25 Due by May 1, 2006		9. Election Campaign Financing ☐		\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10			
TITLE VP NAME ANDREOTTI, JIM STREET ADDRESS 5060 INDIGO BAY BLVD #202 CITY-ST-ZIP ESTERO, FL 33928	☐ Delete				
TITLE T NAME BROUGHTON, STEVE STREET ADDRESS 5021 INDIGO BAY BLVD CITY-ST-ZIP ESTERO, FL 33928	☐ Delete				
TITLE P NAME BRICE, RICHARD J STREET ADDRESS 5070 INDIGO BAY BLDG BLVD #102 CITY-ST-ZIP ESTERO, FL 33928	☐ Delete				
TITLE S NAME REDDINGER, DON STREET ADDRESS 1540 CLUBHOUSE DR CITY-ST-ZIP STEAMBOAT SPRINGS, CO 80487	☒ Delete				
TITLE D NAME WOOD, LEONARD E STREET ADDRESS 19000 SAPPHIRE SHARES LANE #202 CITY-ST-ZIP ESTERO, FL 33928	☐ Delete				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete				
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: <i>Steven C Broughton</i> STEVEN C BROUGHTON 4/17/06					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					