## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P95000094189

Entity Name: 6484 INDIAN CREEK DRIVE, INC.

FILED May 02, 2005 Secretary of State

		on an enterior brave, inve.				
Current Principal Place of Business:			New Princ	New Principal Place of Business:		
	E. SECOND AV ORES, FL 33					
Current Mailing Address:			New Maili	New Mailing Address:		
	E. SECOND AV ORES, FL 33°					
FEI Number	: 65-0669852	FEI Number Applied For ( )	FEI Number Not App	licable ( )	Certificate of Status Desired (X)	
Name and	d Address of (	Current Registered Agent:	Name and	Address o	f New Registered Agent:	
ONE S.E. SUITE 260	ERG, DONALE THIRD AVE. 30 33131 US	OS				
	e named entity e of Florida.	submits this statement for the	purpose of changing i	ts registered	d office or registered agent, or both,	
SIGNATUI	RE:					
	Electro	nic Signature of Registered Ag	ent		Date	
		93(2)(b), F.S., the corporation did n ng Trust Fund Contribution (  ).	ot receive the prior notic	e.		
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS		
Title: Name: Address: City-St-Zip:	*		Title: Name: Address: City-St-Zip:	11300 N.E.	(X) Change ( ) Addition IA, SISTER LINDA OP SECOND AVE. RES, FL 33161	
Title: Name: Address: City-St-Zip:	VD ( LEE, J. PATRI 11300 N.E. SE MIAMI SHORE	COND AVE.	Title: Name: Address: City-St-Zip:		( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	TD ( CZERNIEC, TI 11300 N.E. SE MIAMI SHORE	COND AVE.	Title: Name: Address: City-St-Zip:		( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	SD ( FREI, SIS. JOH 11300 N.E. SE MIAMI SHORE	COND AVE.	Title: Name: Address: City-St-Zip:		( ) Change ( ) Addition	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: TIMOTHY H CZERNIEC SVPB 05/02/2005