

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000094189

Entity Name: 6484 INDIAN CREEK DRIVE, INC.

FILED  
Mar 19, 2009  
Secretary of State

## Current Principal Place of Business:

11300 N.E. SECOND AVE.  
MIAMI SHORES, FL 33161

## New Principal Place of Business:

## Current Mailing Address:

11300 N.E. SECOND AVE.  
MIAMI SHORES, FL 33161

## New Mailing Address:

FEI Number: 65-0669852

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ROSENBERG, DONALD S  
ONE S.E. THIRD AVE.  
SUITE 2600  
MIAMI, FL 33131 US

## Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: BEVILACQUA, SISTER LINDA OP  
Address: 11300 N.E. SECOND AVE.  
City-St-Zip: MIAMI SHORES, FL 33161

Title: TD ( ) Delete  
Name: CZERNIEC, TIMOTHY H  
Address: 11300 N.E. SECOND AVE.  
City-St-Zip: MIAMI SHORES, FL 33161

Title: SD ( ) Delete  
Name: FREI, SIS. JOHN KARE OP  
Address: 11300 N.E. SECOND AVE.  
City-St-Zip: MIAMI SHORES, FL 33161

Title: VD ( ) Delete  
Name: PETERSON, LINDA  
Address: 11300 NE SECOND AVE  
City-St-Zip: MIAMI SHORES, FL 33161

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: TD (X) Change ( ) Addition  
Name: EDWARDS, BRUCE D  
Address: 11300 N.E. SECOND AVE.  
City-St-Zip: MIAMI SHORES, FL 33161

Title: SD (X) Change ( ) Addition  
Name: WALKER, JOHN  
Address: 11300 N.E. SECOND AVE.  
City-St-Zip: MIAMI SHORES, FL 33161

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BRUCE EDWARDS

TD

03/19/2009

Electronic Signature of Signing Officer or Director

Date