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**PROFIT** CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P96000079445

1. Corporation Name

INDIAN CREEK MANAGEMENT, INC.

Principal Place of Business   Mailing Address	<u> </u>						١			
CAMSTON RI 02600 US	Principal Place	e of Business	Mailing /	Address			,		. 10858. 18104. 01811.1	/1881 BH4 1881
CANSTON RI 02800 US	6060 INDIAN CI	reek drive	1140 RES	ERVOIR AVE.						
3. Date Incorporation of Qualified   09/25/1996   09/25/1996   09/25/1996   09/25/1996   09/25/1996   09/25/1996   09/25/1996   09/25/1996   09/25/1996   09/25/1996   09/25/1996   09/25/1996   09/25/1996   09/25/1996   09/25/1996   09/25/1996   09/25/25/25/25/25/25/25/25/25/25/25/25/25/		=	CRANSTO	N RI 02920				50 MGT MGT M TH	0.004.05	
Principal Place of Business   2a, Mailing Address   4, FEI Number   26, Mailing Address   5, FEI Number   5, Cartificate of Status Cested   5, Additional Fee Required Color   5, Additional			US						S SPACE	
Sulfa, Apt. if, etc.   Sc. Certificate of Status Desired   September   Sep								•		
Suite, Apt. 8, etc.    Suite, Apt. 8, etc.   Suite, Apt. 8, etc.   S. Cardicate of Status Desired   \$8,75 Additional Fee Required   S. S. 00 May Be Active   S.	2. Principal P	lace of Business	2a. Mailir	ng Address				4. FEI Number	Ap	plied For
Suite, Apt. 8, etc.  27 27 28 City & State 29 29 20 City & State 29 20 20 20 20 20 20 20 20 20 20 20 20 20	21	•	26					05-0493185	No	t Applicable
City & State		#, etc.	Suite	, Apt. #, etc.				E. Codificate of Status Decired	\$8.75	dditional
City & State  28  Country 28  Country 29  Country 20  Country 20  Country 20  Country 20  Country 20  Country 20  Personal Proporty Tax.  10. Name and Address of Current Registered Agent  CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE FI. 32301  13  Corporation Service Company 1201 HAYS STREET TALLAHASSEE FI. 32301  14  Corporation over significant agent, or both, in the State of Florida, Such change was subthered studyed in corporation's board of directors. I hereby accept the appointment as registered agent, and an address of protect accept the obligations of registered agent, and an address of services of sections 607 0502 and 607 1509. Florids Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent, and an address of protect accept the obligations of sections of sec	22		27					5. Certificate of Status Desireo	Fee Re	quired
20		e .	Çity (	& State	- •			6. Election Campaign Financing	\$5.00	May Be
Zip Country Zip Country Zip Country Be This corporation over the current year Intangible Personal Property Tax.   ve   no   no   no   no   no   no   no   n	23		28					Trust Fund Contribution	Added t	o Fees
9. Name and Address of Current Registered Agent  CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE FL 32301  15. Sireet Address (P.O. Box Number is Not Acceptable)  16. City  FL  17. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment are registered agent, and accept the obligations of, Section 607.0505, Florida Statutes, agent, and accept the obligations of, Section 607.0505, Florida Statutes, agent, and accept the obligations of, Section 607.0505, Florida Statutes, agent, and accept the obligations of, Section 607.0505, Florida Statutes, agent, and accept the obligations of, Section 607.0505, Florida Statutes, agent, and familiar with, and accept the obligations of, Section 607.0505, Florida Statutes, agent, and accept the obligations of, Section 607.0505, Florida Statutes, agent, and accept the obligations of, Section 607.0505, Florida Statutes, agent, and accept the obligations of, Section 607.0505, Florida Statutes, agent, and accept the obligations of, Section 607.0505, Florida Statutes, agent, and accept the obligations of, Section 607.0505, Florida Statutes, agent, and accept the obligations of, Section 607.0505, Florida Statutes, agent, and accept the obligations of, Section 607.0505, Florida Statutes, agent, and accept the obligations of, Section 607.0505, Florida Statutes, agent, and accept the obligations of, Section 607.0505, Florida Statutes, agent, and accept the obligations of, Section 607.0505, Florida Statutes, agent, and accept the obligations of, Section 607.0505, Florida Statutes, agent, and accept the obligations of, Section 607.0505, Florida Statutes, agent, and accept the obligations of, Section 607.0505, Florida Statutes, agent, and accept the obligations of, Section 607.0505, Florida Statutes, agent, and accept the oblig	Zip	Country	Zip		Cour	ntry		8. This corporation owes the current year l		_
State   Street Address of New Registered Agent   State   Street Address (P.O. Box Number is Not Acceptable)	24				30			t		∐No
CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE FL 32301  82 Street Address (P.O. Box Number is Not Acceptable)  83 City  FL 85 Zip Code  84 City  FL 85 Zip Code  85 Zip Code  86 City  FL 85 Zip Code  86 City  FL 85 Zip Code  87 City  FL 85 Zip Code  88 Zip Code  88 Zip Code  89 City  FL 85 Zip Code  89 City  FL 85 Zip Code  80 City  FL 85 Zip Code  80 City  FL 85 Zip Code  81 Directors or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, in the State of Florida. Statutes.  810 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  14. OFFICERS AND DIRECTORS IN 12  14. OFFICERS AND DIRECTORS IN 12  15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  16. Change Addition  17. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  19. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  19. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  22. NAME  22. NAME  22. NAME  22. NAME  23. NEET ADDRESS  24. CITY. 5T. ZIP  10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  24. CITY. 5T. ZIP  25. TREET ADDRESS  26. CITY. 5T. ZIP  27. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  28. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  29. ADDITIONS/CHANGES TO OFFICE		9. Name and Address of Curre	nt Registered	Agent				10. Name and Address of New Registere	d Agent	
1201 HAYS STREET TALLAHASSEE FL 32301  83  84 City FL 85 Zip Code  11. Pursuant to the provisions of Sections 607 0502 and 607 1508, Florida Statutas, the above-named corporation submits this statement for the purpose of changing list registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, am familiar with, and accept the obligations of, Section 607,0505, Florida Statutas, the above-named corporation submits this statement for the purpose of changing list registered agent, am familiar with, and accept the obligations of, Section 607,0505, Florida Statutas.  SIGNATURE  SIGNATURE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE  PROCACCIANTI, ELIZABETH A  1140 RESERVOIR AVE.  1.13 STREET ADDRESS  CRANSTON RI  1140 RESERVOIR AVE.  1.2 NAME  1.4 OTFI-57-2P  1.4 OTFI-57-2P  1.4 OTFI-57-2P  1.5 TITLE  1.5 OFFICERS AND DIRECTORS IN 12  2.2 NAME  2.2 NAME  2.2 NAME  3.3 STREET ADDRESS  CITY-57-2P  1.4 OTFI-57-2P  1.5 OFFICERS AND DIRECTORS IN 12  1.5 OFFICERS AND DIRECTORS IN 12  1.6 OTFI-57-2P  1.6 O		DODATION OFFICE COMPANY	.,			81	Name			
TALLAHASSEE FL 32301  83  84  CRY  FL  85  20  11. Pursuant to the provisions of Sections 807 0502 and 807.1508, Florida Statiutes, the above-named corporation's board of directors. I hereby accept the purpose of changing its registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Florida. Statutes.  SIGNATURE  SIGNATURE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  TITLE  PROCACCIANTI, ELIZABETH A  1140 RESERVOIR AVE.  1.3 STREET ADDRESS  CRY. ST. ZP  1.4 CRY. ST. ZP  1.5 TITLE  1.5			f		ł	82	Street Addre	ess (P.O. Box Number is Not Acceptable)		
SIGNATURE	l				[					
11. Pursuant to the provisions of Sections 607 0502 and 607 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors, i hereby accept the appointment as registered agent, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE    Signature, typed or printed range of registered agent and title if applicable.   (NOTE Registered Agent signature required when reinstating)	TALI	AHASSEE FL 32301			ĺ	83				
11. Pursuant to the provisions of Sections 607 0502 and 607 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors, i hereby accept the appointment as registered agent, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE    Signature, typed or printed range of registered agent and title if applicable.   (NOTE Registered Agent signature required when reinstating)					ŀ	SA.	City		. 85 Zip (	Code
office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of director's. In ereby accept the appointment as registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of director's. In ereby accept the appointment as registered agent and the if agelated agent agent and the intertors. In 12  12.  12.  13. ITLE  14. ITLE  15. I							•	•	<b>L</b>	
Agent. I am familiar with, and accept the obligations of, Section 607.0505, Florada Statutes.    SIGNATURE   Signature, typed or perinder name of registered agent and tabe if applicable. (NOTE: Registered Agent signature real-sized when reinstating)	11. Pursuant	to the provisions of Sections 607.05	02 and 607.150	08, Florida Statuti	es, the at	oove	-named corpo	oration submits this statement for the purpose	of changing its	registered
SIGNATURE   Signature, typed or printed name of registered agent and title if applicable. (NOTE Resistered Agent signature resoluted when reinstating)   DATE	office or r	egistered agent, or both, in the State on familiar with, and accept the oblig	∍ of Florida. Suc ations of Section	ch change was a ion 607,0505. Flo	uthonzed rida Statu	ıtes.	the corporatio	on's board of directors. I hereby accept the app	oinument as re	Jistered
Signature hyped or printed name of registered apent and title if applicables.   (NOTE respicables in passing		and doopt and doop	0.000							}
TITLE	SIGNATURE	Signature, typed or printed name of registered ag	ent and title if applica	able. (NOTE	Registered	Agent	t signature required	d when reinstating) DATE		
NAME	12.	OFFICERS A	ND DIRECTOR	₹S	13.			ADDITIONS/CHANGES TO OFFICERS A		
STREET ADDRESS   CRANSTON RI	TITLE	P		☐ DELETE	1.1 TIT	LE			Change	☐ Addition
CITY-ST-ZIP	NAME	PROCACCIANTI, ELIZABETH /	Ą		1.2 NA	ME				-
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TITLE	CITY-ST-ZIP	CRANSTON RI			1.4 CI7	TY-ST	r-ZIP			
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SIGNATURE:

officer or director of the Block 12 or Block 13 if

STREET ADDRESS

CITY-ST-ZIP

6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this annual report or suppliemental annual 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 employeed to execute this report as required by Chapter 607. Florida Statutes; and that my name appears in