2004 FOR PROFIT CORPORATION

FILED \mathbf{AM}

ANNUAL REPORT					May 03, 2004 08:00 A Secretary of State		
DOCUMENT # P98000104239 ** 1. Entity Name INDIAN BEACH ENTERPRISES, INC.			Secretary of Stat			retary of State	
Principal Plac 916 INDIAN SARASOTA, F	BCH DR	Mailing Address 916 INDIAN BCH DR SARASOTA, FL 34234	Mar. Testina		18/18/2014		
DO NOT WRITE IN THIS SPA			CE	04262004 No Chg-P CR2E034 (10/03)			
6. Name and Address of Current Registered Agent KNOWLES, TIMOTHY A ESQ. 1205 MANATEE AVENUE WEST BRADENTON, FL 34205				-	NOT WE		
	named onlify submits this statement for the considered agent of registered agent. Signature Typed or printed name of registered agent and			stered agent, or both	n, in the State of Flori	da I am familiar with, and accept	
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		9. Election Campaign Fina Trust Fund Contribution	9. Election Campaign Financing \$5 Trust Fund Contribution				
TITLE NAME STREET ADDRESS CHY-ST-ZIP	PST MCLEOD, RICHARD E JR 916 INDIAN BCH DR SARASOTA, FL 34236	RECTORS			NOT WI		
NAME CORRECT ADDRESS							

12. I hereby certify that the information supplied with this filling does not quality 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _

CITY-ST-ZIP TITLE

STREET ADDRESS CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Oute

Oute