

**2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N05000006096

**Entity Name:** INDIGO POINT ON LAKE CARROLL COMMUNITY ASSOCIATION, INC.**Current Principal Place of Business:**10806 INDIGO POINT PLACE  
TAMPA, FL 33612**Current Mailing Address:**10806 INDIGO POINT PLACE  
TAMPA, FL 33612**FEI Number: 26-0264212****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**FELDMAN, MARC H  
3908 26TH ST WEST  
BRADENTON, FL 34205 US*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**Officer/Director Detail :**

|                 |                          |
|-----------------|--------------------------|
| Title           | DP                       |
| Name            | PEAK, JOHN C             |
| Address         | 10806 INDIGO POINT PLACE |
| City-State-Zip: | TAMPA FL 33612           |

|                 |                          |
|-----------------|--------------------------|
| Title           | DS                       |
| Name            | ORTIZ-SILVA, INES        |
| Address         | 10817 INIDGO POINT PLACE |
| City-State-Zip: | TAMPA FL 33612           |

|                 |                          |
|-----------------|--------------------------|
| Title           | DV                       |
| Name            | GOULD, MARTY             |
| Address         | 10810 INDIGO POINT PLACE |
| City-State-Zip: | TAMPA FL 33612           |

|                 |                    |
|-----------------|--------------------|
| Title           | DT                 |
| Name            | CRONEN, GEOFFREY   |
| Address         | 10821 INDIGO POINT |
| City-State-Zip: | TAMPA FL 33612     |

*I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE: JOHN PEAK****PRESIDENT****02/22/2021**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date