

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

DOCUMENT# N19000001984

**Entity Name:** INDABA, INCORPORATED

**Current Principal Place of Business:**

1872 MILL STREET  
A6  
TALLAHASSEE, FL 32310

**Current Mailing Address:**

P.O. BOX 766  
TALLAHASSEE, FL 32301 US

**FEI Number:** 27-1986712

**Certificate of Status Desired:** Yes

**Name and Address of Current Registered Agent:**

COTTERELL, DONNA PEARL  
1872 MILL STREET  
A6  
TALLAHASSEE, FL 32310 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 P  
Name COTTERELL, DONNA PEARL  
Address 703 OSCEOLA STREET  
City-State-Zip: TALLAHASSEE FL 32310

Title TREAS  
Name RUTKOVSKY, PAUL  
Address 517 W GAINES ST  
City-State-Zip: TALLAHASSEE FL 32303

Title VP  
Name SMITH, SHAUNA Y  
Address 814 APACHE STREET  
City-State-Zip: TALLAHASSEE FL 32301-7004

Title COO  
Name JAMES, GEORGE W  
Address 2300 BLUFF OAK WAY  
APT. 3208  
City-State-Zip: TALLAHASSEE FL 32311

Title EXECUTIVE SECRETARY  
Name WATTS, ANDI Y  
Address 2425 MISSION ROAD  
APT. 603  
City-State-Zip: TALLAHASSEE FL 32304-2602

Title MANAGER  
Name PAEZ, MANUEL E.  
Address 703 OSCEOLA STREET  
City-State-Zip: TALLAHASSEE MA 32310

*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:** DONNA PEARL COTTERELL

**PRESIDENT**

**04/30/2021**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date