## 2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N14000009327

**Entity Name: INDIFLY INCORPORATED** 

**Current Principal Place of Business:** 

526 N. RIVERSIDE DRIVE NEW SMYRNA BEACH. FL 32168

**Current Mailing Address:** 

PO BOX 4460

ST PAUL, MN 55104 US

FEI Number: 47-2221348 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

PERKINSON, ALVIN 526 N. RIVERSIDE DRIVE NEW SMYRNA BEACH, FL 32168 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

**FILED** Apr 21, 2015

**Secretary of State** 

CC0825632711

Officer/Director Detail:

Title **CHAIRMAN** Title DIRECTOR

PERKINSON, ALVIN Name SHILLING, MATTHEW Name

PO BOX 4460 Address PO BOX 4460 Address

City-State-Zip: ST PAUL MN 55104 City-State-Zip: ST PAUL MN 55104

Title DIRECTOR Title VC, TREASURER

Name DANYLCHUK, ANDY PHD WHITE, OLIVER Name

Address PO BOX 4460 Address PO BOX 4460

ST PAUL MN 55104 City-State-Zip: City-State-Zip: ST PAUL MN 55104

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: MATTHEW SHILLING

EXECUTIVE DIRECTOR

04/21/2015