

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P96000063605

**Entity Name:** INDIANTOWN COMPANY, INC.

**Current Principal Place of Business:**

15925 S.W. WARFIELD BLVD  
INDIANTOWN, FL 34956

**Current Mailing Address:**

P O BOX 397  
INDIANTOWN, FL 34956 US

**FEI Number:** 65-0727275

**Certificate of Status Desired:** No

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

LESLIE, JEFFREY S  
15925 S.W. WARFIELD BLVD  
INDIANTOWN, FL 34956 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 PD  
Name LESLIE, JEFFREY S  
Address 15925 S.W. WARFIELD BLVD  
City-State-Zip: INDIANTOWN FL 34956

Title S  
Name WEEKS, STEPHANIE H  
Address 15925 S.W. WARFIELD BLVD  
City-State-Zip: INDIANTOWN FL 34956

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

**SIGNATURE:** JEFFREY LESLIE

**PRESIDENT**

**01/10/2015**

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

\_\_\_\_\_  
Date