

2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

**FILED
Jul 20, 2006
Secretary of State**

DOCUMENT# 146152

Entity Name: INDIAN RIVER EXCHANGE PACKERS, INC.

Current Principal Place of Business:

7355 S.W. 9TH STREET
VERO BCH, FL 32968

New Principal Place of Business:

Current Mailing Address:

7355 S.W. 9TH STREET
VERO BCH, FL 32968

New Mailing Address:

FEI Number: 59-0555351 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HAMNER, GEORGE F JR
7355 S.W. 9TH STREET
VERO BEACH, FL 32968 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: CSD () Delete
Name: HAMNER, G.F.,
Address: 650 SOUTH A1A
City-St-Zip: VERO BEACH, FL

Title: PTD () Delete
Name: HAMNER, G.F. JR,
Address: 995 SANDFLY LN.
City-St-Zip: VERO BEACH, FL

Title: VD () Delete
Name: SEXTON, E G,
Address: 7 STARFISH DRIVE
City-St-Zip: VERO BEACH, FL

Title: VD () Delete
Name: HAMNER, A.G.,
Address: 650 SOUTH A1A
City-St-Zip: VERO BEACH, FL

Title: D () Delete
Name: GORDON, N H,
Address: 670 HWY A1A
City-St-Zip: VERO BEACH, FL 32963

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D () Change (X) Addition
Name: BERNARD EGAN & COMPA, NY
Address: 1900 OLD DIXIE HIGHWAY
City-St-Zip: FORT PIERCE, FL 34946 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: GEORGE F. HAMNER, JR.

PTD

07/20/2006

Electronic Signature of Signing Officer or Director

_____ Date