

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 709584

FILED
Jan 05, 2011
Secretary of State

Entity Name: INDIAN RIVER STATE COLLEGE FOUNDATION, INC.

Current Principal Place of Business:

3209 VIRGINIA AVE
FORT PIERCE, FL 349815596

New Principal Place of Business:

Current Mailing Address:

3209 VIRGINIA AVE
FORT PIERCE, FL 349815596

New Mailing Address:

FEI Number: 59-1105591

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GRIFFIN, CHESTER B ATTY
311 SOUTH 2ND STREET
FT PIERCE, FL 34950 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: D
Name: IRBY, FRANK M
Address: 1385 S.E. 23RD STREET
City-St-Zip: OKEECHOBEE, FL 34994

Title: D
Name: ADAMS, MICHAEL L
Address: P.O. BOX 12909
City-St-Zip: FT. PIERCE, FL 34979

Title: EXED
Name: DECKER, ANN L
Address: PO BOX 497
City-St-Zip: JENSEN BEACH, FL 34958

Title: D
Name: CONRADO, JOSE L
Address: 1001 ADMIRALS WALK
City-St-Zip: VERO BEACH, FL 32963

Title: D
Name: CLEMONS, SUSANNE H
Address: 4853 NW 30TH ST
City-St-Zip: OKEECHOBEE, FL 34972

Title: D
Name: AMOWITT, EDWIN
Address: 960 S W BAY POINTE CIRCLE
City-St-Zip: PALM CITY, FL 349901758

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: ANN L. DECKER

ED

01/05/2011

Electronic Signature of Signing Officer or Director

Date