2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 13, 2012
Secretary of State

DOCUMENT# N44395

Entity Name: INDIAN RIVER COUNTY AIRBOAT ASSOCIATION, INC.

Current Principal Place of Business:

10215 134TH CT
FELLSMERE, FL 32948

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 291
FELLSMERE, FL 32948

New Mailing Address:

FEI Number: 65-0319844 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

EMMONS, KIMBERLY
10215 134TH CT
FELLSMERE, FL 32948 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: P
Name: EMMONS, DANNY M
Address: 10215 134TH CT
City-St-Zip: FELLSMERE, FL 32948

Title: VP
Name: SMALLEY, CHAD
Address: 8565 99TH CT
City-St-Zip: VERO BEACH, FL 32967

Title: S
Name: EMMONS, KIMBERLY
Address: 10215 134TH CT
City-St-Zip: FELLSMERE, FL 32948

Title: T
Name: SMITH, SINDY
Address: P.O. BOX 668
City-St-Zip: ROSELAND, FL 32957

Title: D
Name: FLOOD, DOUG
Address: 924 LOUSIANNA AVE
City-St-Zip: SEBASTIAN, FL 32958

Title: D
Name: SMITH, SAM
Address: P O BOX 668
City-St-Zip: ROSELAND, FL 32958

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: KIMBERLY EMMONS S 01/13/2012
Electronic Signature of Signing Officer or Director Date