

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000006715

FILED
Feb 11, 2009
Secretary of State

Entity Name: TAXPAYERS ASSOCIATION OF INDIAN RIVER COUNTY, INC.

Current Principal Place of Business:

P.O. BOX 1751
VERO BEACH, FL 329611751

New Principal Place of Business:

C/O PAUL TERESI
1285 ADMIRALS WALK
VERO BEACH, FL 32963

Current Mailing Address:

P.O. BOX 1751
VERO BEACH, FL 329611751

New Mailing Address:

P.O. BOX 1751
VERO BEACH, FL 32961

FEI Number: 54-2551432

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPYTEK, ROSEMARIE
2498 3RD PL SW
VERO BEACH, FL 32962 US

Name and Address of New Registered Agent:

TERESI, PAUL
1285 ADMIRALS WALK
VERO BEACH, FL 32963 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: PAUL TERESI

02/11/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SPYTER, ROSE
Address: 2498 3RD PLACE SW
City-St-Zip: VERO BEACH, FL 32962

Title: 1VP () Delete
Name: TERESI, PAUL
Address: 1285 ADMIRALS WALK
City-St-Zip: VERO BEACH, FL 32963

Title: V () Delete
Name: MCDONALD, MARY BETH
Address: 1011 INDIAN MOUND TRL
City-St-Zip: VERO BEACH, FL 32963

Title: S () Delete
Name: WILSON, ROSEMARIE
Address: 1490 5TH AVE
City-St-Zip: VERO BEACH, FL 32960

Title: T () Delete
Name: BROWN, GREGORY T
Address: 360 53RD CIR
City-St-Zip: VERO BEACH, FL 32968

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: SPYTER, ROSE
Address: 2498 3RD PLACE SW
City-St-Zip: VERO BEACH, FL 32962

Title: P (X) Change () Addition
Name: TERESI, PAUL
Address: 1285 ADMIRALS WALK
City-St-Zip: VERO BEACH, FL 32963

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

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

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

I hereby certify that the information supplied with this filing does not qualify 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: GREGORY T BROWN

T

02/11/2009

Electronic Signature of Signing Officer or Director

Date