

**2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N06000006715

**Entity Name:** TAXPAYERS ASSOCIATION OF INDIAN RIVER COUNTY, INC.**Current Principal Place of Business:**C/O MATT ERPENBECK  
1110 OLD DIXIE HWY, SUITE A3  
VERO BEACH, FL 32960**Current Mailing Address:**P.O. BOX 1751  
VERO BEACH, FL 32961-1751 IR**FEI Number: 54-2551432****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**ERPENBECK, MATT  
1110 OLD DIXIE HWY, SUITE A3  
VERO BEACH, FL 32960 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:** MATT ERPENBECK

01/22/2020

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title	PRESIDENT
Name	ERPENBECK, MATT
Address	4900 13TH LANE
City-State-Zip:	VERO BEACH FL 32966

Title	TREASURER
Name	BLACKBURN, PAT
Address	941 OYSTER SHELL LANE
City-State-Zip:	VERO BEACH FL 32963

Title	VICE PRESIDENT
Name	STEWART, JORDAN
Address	3965 9TH PLACE
City-State-Zip:	VERO BEACH FL 32960

Title	ASSISTANT TREASURER
Name	JOHNSON, ALICE
Address	5470 E HARBOR VILLAGE DR
City-State-Zip:	VERO BEACH FL 32967

*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:** PAT BLACKBURN

TREASURER

01/22/2020

Electronic Signature of Signing Officer/Director Detail

Date