2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 11, 2019
Secretary of State
7889912042CC

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Entity Name: INDIAN RIVER CHARITABLE ASSOCIATION, INC

Current Principal Place of Business:

1316 20TH STREET
VERO BEACH, FL 32960

Current Mailing Address:

PO BOX 650271
VERO BEACH, FL 32965 US

FEI Number: 45-3164409

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

VARTIGIAN, RICHARD A
1103 US HIGHWAY 1
SUITE 3
SEBASTIAN, FL 32958 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: RICHARD A VARTIGIAN 03/11/2019

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	PRESIDENT
Name	THOMPSON, DERRICK
Address	PO BOX 650271
City-State-Zip:	VERO BEACH FL 32965

Title	VICE PRESIDENT
Name	HALSTED, GARY
Address	PO BOX 650271
City-State-Zip:	VERO BEACH FL 32965

Title	EXECUTIVE SECRETARY
Name	D'ANGELO, DIANA
Address	PO BOX 650271
City-State-Zip:	VERO BEACH FL 32965

Title	TREASURER
Name	D'ANGELO, DIANA
Address	PO BOX 650271
City-State-Zip:	VERO BEACH FL 32965

Title	DIRECTOR
Name	D'ANGELO, EDWARD
Address	PO BOX 650271
City-State-Zip:	VERO BEACH FL 32965

Title	DIRECTOR
Name	HALSTEAD, LYNNE
Address	PO BOX 650271
City-State-Zip:	VERO BEACH FL 32965

Title	DIRECTOR
Name	JOHNSON, CHERYLE
Address	PO BOX 650271
City-State-Zip:	VERO BEACH FL 32965

Title	DIRECTOR
Name	MARCO, DORIS
Address	PO BOX 650271
City-State-Zip:	VERO BEACH FL 32965

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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: DIANA D'ANGELO SECRETARY 03/11/2019

Electronic Signature of Signing Officer/Director Detail — Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	OLSSON, ANNETTE
Address	PO BOX 650271
City-State-Zip:	VERO BEACH FL 32965