### 2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000006207

Entity Name: INDIAN RIVER LITERARY SOCIETY, INC.

FILED
Jan 09, 2015
Secretary of State
CC3304345042

## **Current Principal Place of Business:**

755 BEACHLAND BLVD. VERO BEACH. FL 32963

## **Current Mailing Address:**

P.O. BOX 3308

VERO BEACH, FL 32964

FEI Number: 65-0794160 Certificate of Status Desired: Yes

# Name and Address of Current Registered Agent:

CHENAULT, SUSAN 755 BEACHLAND BLVD. 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:

Electronic Signature of Registered Agent

Date

#### Officer/Director Detail:

Title	0	Title	PRESIDENT
Name	GORMAN, MARY	Name	LOWE, THOMAS P
Address	P.O. BOX 3308 (NA)	Address	P.O. BOX 3308
City-State-Zip:	VERO BEACH FL 32964	City-State-Zip:	VERO BEACH FL 32964

Title D Title DIRECTOR

Name BAHRENBURG, WILLIAM Name FERRELL, CATHY
Address P. O. BOX 3308 Address P.O. BOX 3308

City-State-Zip: VERO BEACH FL 32964 City-State-Zip: VERO BEACH FL 32964

Title TREASURER Title DIRECTOR

Name CHENAULT. SUSAN Name PISTOLE, MERCEDES

Address P.O. BOX 3308 Address P.O. BOX 3308

City-State-Zip: VERO BEACH FL 32964 City-State-Zip: VERO BEACH FL 32964

Title VP Title DIRECTOR

Name BASS, ELIZABETH Name REPLOGLE, MARY ELLEN

Address P.O. BOX 3308 Address P.O. BOX 3308

City-State-Zip: VERO BEACH FL 32964 City-State-Zip: VERO BEACH FL 32964

# Continues on page 2

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: SUSAN L. CHENAULT TREASURER 01/09/2015

Electronic Signature of Signing Officer/Director Detail

Date

# Officer/Director Detail Continued:

Title DIRECTOR

Name SIRICH, PEGGY

Address P.O. BOX 3308

City-State-Zip: VERO BEACH FL 32964

Title D

Name TROOB, SHEILA Address P.O. BOX 3308

City-State-Zip: VERO BEACH FL 32964

Title DIRECTOR

Name MICHALS, RICKI

Address P.O. BOX 3308

City-State-Zip: VERO BEACH FL 32964