

**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N97000006207

**Entity Name:** INDIAN RIVER LITERARY SOCIETY, INC.**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 O  
Name GORMAN, MARY  
Address P.O. BOX 3308 (NA)  
City-State-Zip: VERO BEACH FL 32964

Title PRESIDENT  
Name LOWE, THOMAS P  
Address P.O. BOX 3308  
City-State-Zip: VERO BEACH FL 32964

Title D  
Name BAHRENBURG, WILLIAM  
Address P. O. BOX 3308  
City-State-Zip: VERO BEACH FL 32964

Title DIRECTOR  
Name FERRELL, CATHY  
Address P.O. BOX 3308  
City-State-Zip: VERO BEACH FL 32964

Title TREASURER  
Name CHENAULT, SUSAN  
Address P.O. BOX 3308  
City-State-Zip: VERO BEACH FL 32964

Title DIRECTOR  
Name PISTOLE, MERCEDES  
Address P.O. BOX 3308  
City-State-Zip: VERO BEACH FL 32964

Title VP  
Name BASS, ELIZABETH  
Address P.O. BOX 3308  
City-State-Zip: VERO BEACH FL 32964

Title DIRECTOR  
Name REPLOGLE, MARY ELLEN  
Address P.O. BOX 3308  
City-State-Zip: VERO BEACH FL 32964

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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:** SUSAN L. CHENAULT**TREASURER****02/01/2016**\_\_\_\_\_  
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