

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 703143

FILED
Feb 23, 2006
Secretary of State

Entity Name: INDIAN RIVER LITTLE HOUSE ASSOCIATION, INC.

Current Principal Place of Business:

1846 18 AVE
VERO BEACH FLA, 32960 US

New Principal Place of Business:

1846 18 AVE
VERO BEACH, FL 32960 US

Current Mailing Address:

5070 N HWY A1A
SUITE 200
VERO BEACH, FL 32963

New Mailing Address:

P.O. BOX 643068
VERO BEACH, FL 32964

FEI Number: 59-2359662

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TAYLOR, J.ATWOOD III
5070 NORTH A1A
VERO BEACH, FL 32463 US

Name and Address of New Registered Agent:

HEWETT, RONNIE
2926 PIPER DRIVER
BUILDING 13
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: RONNIE HEWETT

02/23/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: STD () Delete
Name: SWEZEY, TERRY
Address: 1846-18TH AVE
City-St-Zip: VERO BEACH, FL 32960

Title: DP () Delete
Name: WISEMAN, THOMAS
Address: 1846 18TH AVE
City-St-Zip: VERO BEACH, FL 32960

Title: D (X) Delete
Name: LUE, MICHAEL
Address: 1846 18TH AVE
City-St-Zip: VERO BEACH, FL 32960

Title: D (X) Delete
Name: RICE, PATRICK
Address: 1846 18TH AVE
City-St-Zip: VERO BEACH, FL 32960

Title: P (X) Delete
Name: TAYLOR, J A III
Address: 5070 N HWY A-1-A STE 200
City-St-Zip: VERO BCH, FL 32963

Title: D (X) Delete
Name: ADKINS, MICHAEL
Address: 1846-18TH AVE
City-St-Zip: VERO BEACH, FL 32960

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: HEWETT, RONNIE
Address: P.O. BOX 643068
City-St-Zip: VERO BEACH, FL 32964

Title: VP (X) Change () Addition
Name: COTHERMAN, PAUL R III
Address: P.O. BOX 643068
City-St-Zip: VERO BEACH, FL 32964

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

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 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: RONNIE HEWETT

PRES

02/23/2006

Electronic Signature of Signing Officer or Director

Date