

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 733596

FILED
Apr 03, 2009
Secretary of State

Entity Name: ABILITIES RESOURCE CENTER OF INDIAN RIVER COUNTY, INC.

Current Principal Place of Business:

1375-16TH AVENUE
VERO BEACH, FL 329603768

New Principal Place of Business:

Current Mailing Address:

1375-16TH AVENUE
VERO BEACH, FL 329603768

New Mailing Address:

FEI Number: 59-1626205 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BRADLEY, CHARLES
1375 16TH AVENUE
VERO BEACH, FL 32960 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: CD () Delete
Name: BURNS, MICHAEL
Address: 333 17 STREET SUITE A
City-St-Zip: VERO BEACH, FL 32960

Title: VD () Delete
Name: BRACKINS, AJ
Address: 1375 16TH AVE
City-St-Zip: VERO BEACH, FL 32960

Title: D () Delete
Name: PICKAN, WILLIAM
Address: 1910 TARPON LANE #204
City-St-Zip: VERO BEACH, FL 32960

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: COB (X) Change () Addition
Name: BRACKENS, AJ
Address: 1375 16TH AVE
City-St-Zip: VERO BEACH, FL 32960

Title: VD (X) Change () Addition
Name: BROWN, CALVIN
Address: 680 SE 23RD ST
City-St-Zip: VERO BEACH, FL 32962

Title: D (X) Change () Addition
Name: PICKEN, WILLIAM
Address: 1910 TARPON LANE #204
City-St-Zip: VERO BEACH, FL 32960

Title: SOBD () Change (X) Addition
Name: RICHMOND, JANINE
Address: 5900 CLUBHOUSE DRIVE
City-St-Zip: VERO BEACH, FL 32967

Title: EXDD () Change (X) Addition
Name: BRADLEY, CHARLES
Address: 1375 16TH AVE
City-St-Zip: VERO BEACH, FL 32960

I hereby certify that the information supplied with this filing does not qualify 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: CHARLES BRADLEY

Electronic Signature of Signing Officer or Director

EXDD

04/03/2009

Date