

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 739655 (9)

1. Corporation Name

INDIAN RIVER CONTROL SOCIETY, INC.

Principal Place of Business

P.O. BOX 061344
PALM BAY FL 32906-1344
US

Mailing Address

P.O. BOX 061344
PALM BAY FL 32906-1344
US



3. Date Incorporated or Qualified
07/12/1977

3a. Date of Last Report
06/26/1995

2. Principal Place of Business

21 IRKS Inc.

2a. Mailing Address

26 IRKS Inc.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 7100 Cottonwood Dr

27 7100 Cottonwood Dr

City & State

City & State

23 Grant FL

28 Grant FL

Zip Country

Zip Country

24 32949 25 US

29 32949 30 US

4. FEI Number
59-1781207

Applied For
☒ Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

SMITH, SKYLER
11388 S TROPICAL TRAIL
MERRITT ISLAND FL 32952

10. Name and Address of New Registered Agent

81 Name
Emory Irons
82 Street Address (P.O. Box Number is Not Acceptable)
7100 Cottonwood Dr.
83
84 City
Grant FL 85 Zip Code
32949

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Emory E. Irons

Emory E. Irons

6 Feb 1996

Signature, typed or printed name of registered agent, and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD
NAME IRONS, ED ☒ DELETE
STREET ADDRESS 7100 COTTONWOOD DR.
CITY-ST-ZIP PALM BAY FL

TITLE VD
NAME ARMSTRONG, GERALD ☐ DELETE
STREET ADDRESS 443 CONSOLATA AVE. N.W.
CITY-ST-ZIP PALM BAY FL

TITLE TD
NAME BOUSQUET, PHILLIP ☒ DELETE
STREET ADDRESS 1130 PEMBROKE AVE NE
CITY-ST-ZIP PALM BAY FL

TITLE SD
NAME SKYLER, SMITH ☒ DELETE
STREET ADDRESS 11388 S TROPICAL TRAIL
CITY-ST-ZIP MERRITT ISLAND FL

TITLE D
NAME PERRY, TOM ☒ DELETE
STREET ADDRESS 2500 FORREST RUN DR
CITY-ST-ZIP MELBOURNE FL

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PD ☒ Change ☐ Addition
1.2 NAME Tom Perry
1.3 STREET ADDRESS 2500 Forrest Run Dr.
1.4 CITY-ST-ZIP Melbourne FL 32935

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE TD ☒ Change ☐ Addition
3.2 NAME Mike D'Amico
3.3 STREET ADDRESS 1261 Medina Ave N.W.
3.4 CITY-ST-ZIP Palm Bay FL 32907

4.1 TITLE SD ☒ Change ☐ Addition
4.2 NAME Emory Irons
4.3 STREET ADDRESS 7100 Cottonwood Dr
4.4 CITY-ST-ZIP Grant FL 32949

5.1 TITLE D ☒ Change ☐ Addition
5.2 NAME Bud Roane
5.3 STREET ADDRESS 3461 Beth Lane
5.4 CITY-ST-ZIP Melbourne FL 32934

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Emory E. Irons

Emory E. Irons

6 Feb 1996

407-729-7149

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (12/95)