

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 739655

Entity Name: INDIAN RIVER KONTROL SOCIETY, INC.

FILED
Jan 07, 2004
Secretary of State

Current Principal Place of Business:

IRKS INC.
7100 COTTONWOOD DR
GRANT, FL 32949 US

New Principal Place of Business:

Current Mailing Address:

IRKS INC.
7100 COTTONWOOD DR
GRANT, FL 32949 US

New Mailing Address:

FEI Number: 59-1781207 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

EMORY, IRONS
7100 COTTONWOOD DR
GRANT, FL 32949 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: P () Delete
Name: ARMSTRONG, GERALD
Address: 443 CONSOLATA AVE. N.W.
City-St-Zip: PALM BAY, FL 32907

Title: TD () Delete
Name: LAWRENCE, SUE
Address: 340 VIKING ST NE
City-St-Zip: PALM BAY, FL 32905

Title: SD () Delete
Name: IRONS, EMORY
Address: 7100 COTTONWOOD DR
City-St-Zip: GRANT, FL

Title: D () Delete
Name: DOBYNS, TOM E.
Address: 2115 MANOR DR NE
City-St-Zip: PALM BAY, FL 32905

Title: V () Delete
Name: KASUNIC, MARK
Address: 4615 SMITHFIELD RD
City-St-Zip: MELBOURNE, FL 32934

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: SD (X) Change () Addition
Name: IRONS, EMORY
Address: 7100 COTTONWOOD DR
City-St-Zip: GRANT, FL 32949

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 Section 119.07(3)(i), 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: EMORY E. IRONS

SD

01/07/2004

Electronic Signature of Signing Officer or Director

_____ Date