

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 739655

FILED
Jan 18, 2006
Secretary of State

Entity Name: INDIAN RIVER KONTROL SOCIETY, INC.

Current Principal Place of Business:

IRKS INC.
7100 COTTONWOOD DR
GRANT, FL 32949 US

Current Mailing Address:

IRKS INC.
7100 COTTONWOOD DR
GRANT, FL 32949 US

New Principal Place of Business:

IRKS INC.
1217 AUBURN LAKES DR
ROCKELDGE, FL 32955 US

New Mailing Address:

IRKS INC.
1217 AUBURN LAKES DR
ROCKLEDGE, FL 32955 US

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:

FORMANEK, LARRY S
1217 AUBURN LAKES DR
ROCKELDGE, FL 32955 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: LARRY S FORMANEK

01/18/2006

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 32949

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

Title: V () Delete
Name: BUCK, ALLAN
Address: 1070A LORING DRIVE
City-St-Zip: MERRITT ISLAND, FL 32953

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: FORMANEK, LARRY S
Address: 1217 AUBURN LAKES DR
City-St-Zip: ROCKLEDGE, FL 32955

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: LARRY S FORMANEK

SD

01/18/2006

Electronic Signature of Signing Officer or Director

Date