

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 769611

FILED
Jan 03, 2012
Secretary of State

Entity Name: THE INDIAN RIVER CHAPTER, MILITARY OFFICERS ASSOCIATION OF AMERICA (MOAA), INC.

Current Principal Place of Business:

INDIAN RIVER CHAPTER, MOAA
2031 VALENCIA AVENUE
VERO BEACH, FL 32960 US

New Principal Place of Business:

Current Mailing Address:

INDIAN RIVER CHAPTER, MOAA
PO BOX 644047
VERO BEACH, FL 32964

New Mailing Address:

FEI Number: 59-2406669

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FOX, ROBERT B
2031 VALENCIA 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: P
Name: WEISS, MICHAEL J
Address: 436 12TH PLACE SE
City-St-Zip: VERO BEACH, FL 32962

Title: VP
Name: CARSON, SCOTT
Address: 1060 CAROLINA CIRCLE SW
City-St-Zip: VERO BEACH, FL 32963

Title: VP
Name: FLICK, RICHARD H
Address: 5370 E. 1ST SQUARE SW
City-St-Zip: VERO BEACH, FL 32968

Title: S
Name: DUER, KRISTOPHER C
Address: 5680 62ND PLACE
City-St-Zip: VERO BEACH, FL 32967

Title: T
Name: FOX, ROBERT B
Address: 2031 VALENCIA AVE.
City-St-Zip: VERO BEACH, FL 32960

Title: D
Name: WICKSTRAND, DON R
Address: 5670 HWY A1A, #215
City-St-Zip: VERO BEACH, FL 32963

I hereby 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 all other like empowered.

SIGNATURE: DON R. WICKSTRAND

D

01/03/2012

Electronic Signature of Signing Officer or Director

_____ Date