

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L73115

FILED
Apr 15, 2008
Secretary of State

Entity Name: EQUITY RESOURCE GROUP OF INDIAN RIVER COUNTY, INC.

Current Principal Place of Business:

2614 CARDINAL DRIVE
VERO BEACH, FL 32963

New Principal Place of Business:

Current Mailing Address:

2614 CARDINAL DRIVE
VERO BEACH, FL 32963

New Mailing Address:

FEI Number: 65-0197458

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WILLIAMS, ANDREW W.
2614 CARDINAL DRIVE
VERO BEACH, FL 32963 US

Name and Address of New Registered Agent:

WILLIAMS, ANDREW W PRES
2614 CARDINAL DRIVE
VERO BEACH, FL 32963 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: ANDREW W WILLIAMS

04/15/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: WILLIAMS, ANDREW W.,
Address: 2614 CARDINAL DRIVE
City-St-Zip: VERO BEACH, FL 32960

Title: D () Delete
Name: STUBBS, WM. KING,
Address: 135 SAGO PALM ROAD
City-St-Zip: JOHNS ISLAND, FL 32963

Title: D () Delete
Name: MINOTTY, PAUL V.,
Address: 136 OCEAN WAY
City-St-Zip: VERO BEACH, FL

Title: SD () Delete
Name: BLOCK, SAMUEL A.,
Address: 2127 10TH AVENUE
City-St-Zip: VERO BEACH, FL

Title: D () Delete
Name: HAMNER, GEORGE F JR.
Address: 7355 9TH STREET, S.W.
City-St-Zip: VERO BEACH, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ANDREW W WILLIAMS

PD

04/15/2008

Electronic Signature of Signing Officer or Director

Date