

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000000764

FILED
May 01, 2006
Secretary of State

Entity Name: BOYS & GIRLS CLUB OF INDIAN RIVER COUNTY, INC.

Current Principal Place of Business:

P O BOX 643068
VERO BEACH, FL 32964

New Principal Place of Business:

Current Mailing Address:

P O BOX 643068
VERO BEACH, FL 32964

New Mailing Address:

FEI Number: 59-3623298 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

HEWETT, RONNIE L
2926 PIPER DRIVE
BUILDING 13
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: VPD () Delete
Name: LYNCH, GERARD P MR.
Address: P O BOX 643068
City-St-Zip: VERO BEACH, FL 32964

Title: SD () Delete
Name: RITCHIE, LENOARA A MRS.
Address: P O BOX 643068
City-St-Zip: VERO BEACH, FL 32964

Title: CHM () Delete
Name: MCNAMARA, JAY MR.
Address: PO BOX 643068
City-St-Zip: VERO BEACH, FL 32964

Title: TD () Delete
Name: THURN, ANDREA MRS.
Address: P O BOX 643068
City-St-Zip: VERO BEACH, FL 32964

Title: PD () Delete
Name: HEWETT, RONNIE L MR.
Address: P O BOX 643068
City-St-Zip: VERO BEACH, FL 32964

Title: VPD () Delete
Name: COTHERMAN, ROSS MR.
Address: P.O BOX 3068
City-St-Zip: VERO BEACH, FL 32964

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: SD (X) Change () Addition
Name: CLEM, CHESTER MR.
Address: P O BOX 643068
City-St-Zip: VERO BEACH, FL 32964

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

Title: TD (X) Change () Addition
Name: BURGOON, RICHARD MR.
Address: P O BOX 643068
City-St-Zip: VERO BEACH, FL 32964

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: CHESTER CLEM

MR.

05/01/2006

Electronic Signature of Signing Officer or Director

Date