2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000000764

FILED Jan 06, 2008 Secretary of State

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

Name and Address of Current Registered Agent: Name and Address of New Registered Agent: Name and Address of N						
DUILDING 13 VERO BEACH, FL 32960	Current P	rincipal Place	of Business:	New Principal Plac	New Principal Place of Business:	
P O BOX 643068 VERO BEACH, FL 32964 FEI Number: 59-3623298 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent:				BUILDING 13	BUILDING 13	
### FEI Number: 59-3623298 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of Current Registered Agent: Name and Address of New Registered Agent:	Current Mailing Address:			New Mailing Addre	New Mailing Address:	
Name and Address of Current Registered Agent: HEWETT, RONNIE L 2926 PIPER DRIVE BUILDING 13 VERO BEACH, FL 32960 US The above named entity submits this statement for the purpose of changing its registered office or registered agent, or to not the State of Florida. SIGNATURE: Electronic Signature of Registered Agent			4			
HEWETT, RONNIE L 1926 PIPER DRIVE 30ILDING 13 LERO BEACH, FL 32960 US The above named entity submits this statement for the purpose of changing its registered office or registered agent, or to not not be State of Florida. SIGNATURE: Electronic Signature of Registered Agent	El Number	: 59-3623298	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
1925 PIPER DRIVE	Name and	d Address of C	Current Registered Agent:	Name and Address	of New Registered Agent:	
Electronic Signature of Registered Agent	2926 PIPE BUILDING /ERO BE/ The above	R DRIVE i 13 ACH, FL 3296 e named entity :		urpose of changing its registe	red office or registered agent, or both,	
Electronic Signature of Registered Agent	SIGNATUI	RE:				
Title:			nic Signature of Registered Age	nt	Date	
Name: LYNCH, GERÂRD P MR. Name: Address: P O BOX 643068 Address: P O BOX 643068 Address: City-St-Zip: VERO BEACH, FL 32964 City-St-Zip: Clem, CHESTER MR. Name: Address: P O BOX 643068 Address: P O BOX 643068 Address: P O BOX 643068 Address: City-St-Zip: VERO BEACH, FL 32964 City-St-Zip:	OFFICERS AND DIRECTORS:			ADDITIONS/CHAN	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Name: CLEM, CHESTER MR. Name: Address: P O BOX 643068 Address: P O BOX 643068 Address: City-St-Zip: VERO BEACH, FL 32964 City-St-Zip: City-St-Zip: Change () Addition Name: MCNAMARA, JAY MR. Name: MCNAMARA, JAY MR. Name: Address: PO BOX 643068 Address: City-St-Zip: VERO BEACH, FL 32964 City-St-Zip: Ci	Name: Nddress:	LYNCH, GERAI P O BOX 64300	RD P MR. 68	Name: Address:	() Change () Addition	
Name: MCNAMARA, JAY MR. Name: Address: PO BOX 643068 City-St-Zip: VERO BEACH, FL 32964 City-St-Zip: Name: () Change () Addition Name: () Change () Addition Name: () Change () Addition Name: () City-St-Zip: Name: () Change () Addition Name: () Change () Addition Name: () City-St-Zip: Name: () Change () Addition Name: () COTHERMAN, ROSS MR.	lame: \ddress:	CLEM, CHESTI P O BOX 64300	ER MR. 68	Name: Address:	() Change () Addition	
Name: BURGOON, RICHARD MR. Name: Address: P O BOX 643068 Address: City-St-Zip: VERO BEACH, FL 32964 City-St-Zip: Title: PD () Delete Title: () Change () Addition Name: Address: P O BOX 643068 Address: City-St-Zip: VERO BEACH, FL 32964 Address: PO BOX 3068 Address: P.O BOX 3068 Address: Address: Address: Address: P.O BOX 3068	√ame: √ddress:	MCNAMARA, JA PO BOX 64306	AY MR. 8	Name: Address:	() Change () Addition	
Name: HEWETT, RONNIE L MR. Name: Address: P 0 BOX 643068 Address: City-St-Zip: VERO BEACH, FL 32964 City-St-Zip: Title: VPD () Delete Title: () Change () Addition Name: COTHERMAN, ROSS MR. Name: Address: P.O BOX 3068 Address:	lame: \ddress:	BURGOON, RIG P O BOX 64306	CHARD MR. 68	Name: Address:	() Change () Addition	
Name: COTHERMAN, ROSS MR. Name: Address: P.O BOX 3068 Address:	√ame: √ddress:	HEWETT, RON P O BOX 64306	NIE L MR. 68	Name: Address:	() Change () Addition	
	√ame: Address:	COTHERMAN, P.O BOX 3068	ROSS MR.	Name: Address:	() Change () Addition	

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

SIGNATURE: RONNIE HEWETT PRES 01/06/2008