

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000002451

FILED  
Jan 05, 2006  
Secretary of State

Entity Name: INDIAN RIVER REGION AACA, INC.

## Current Principal Place of Business:

239 SPINNAKER DRIVE  
VERO BEACH, FL 32963

## New Principal Place of Business:

465 VENTURA PL  
VERO BEACH, FL 32963

## Current Mailing Address:

239 SPINNAKER DRIVE  
VERO BEACH, FL 32963

## New Mailing Address:

465 VENTURA PLACE  
VERO BEACH, FL 32963

FEI Number: 03-0447282

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BUTTON, GEORGE  
239 SPINNAKER DRIVE  
VERO BEACH, FL 32963 US

## Name and Address of New Registered Agent:

WILHELM, JERRY E  
465 VENTURA PLACE  
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: JERRY E. WILHELM

01/05/2006

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: STEENE, KARL  
Address: 1240 ADMIRAL'S WACK  
City-St-Zip: VERO BEACH, FL 32963

Title: VP ( ) Delete  
Name: WILHELM, GAY  
Address: 465 VENTURA PL.  
City-St-Zip: VERO BEACH, FL 32963

Title: S ( ) Delete  
Name: MCDONALD, RUTH  
Address: 610 39TH COURT S.W.  
City-St-Zip: VERO BEACH, FL 32968

Title: T ( ) Delete  
Name: WILHELM, JERRY E  
Address: 465 VENTURA PL.  
City-St-Zip: VERO BEACH, FL 32963

Title: D (X) Delete  
Name: MCDONALD, JOHN  
Address: 610 39TH COURT S.W.  
City-St-Zip: VERO BEACH, FL 32968

Title: D (X) Delete  
Name: BUTLER, ROGER  
Address: 239 SPINNAKER DRIVE  
City-St-Zip: VERO BEACH, FL 32963

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: HOROVITZ, MARVIN  
Address: 9026 CASTLE HARBOR CIRCLE  
City-St-Zip: VERO BEACH, FL 32963

Title: VP (X) Change ( ) Addition  
Name: KASTENSMIDT, JIM  
Address: 866 34TH. AVENUE  
City-St-Zip: VERO BEACH, FL 32960

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 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: JERRY E. WILHELM

T

01/05/2006

Electronic Signature of Signing Officer or Director

Date