


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED

Jan 08, 2007 08:00 AM
Secretary of State

DOCUMENT # N02000002451 1. Entity Name INDIAN RIVER REGION AACA, INC.	
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Principal Place of Business 465 VENTURA PL VERO BEACH, FL 32963	Mailing Address 465 VENTURA PLACE VERO BEACH, FL 32963
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01032007 No Chg-NP

CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number 03-0447282	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent WILHELM, JERRY E 465 VENTURA PLACE VERO BEACH, FL 32963
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**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P HOROVITZ, MARVIN 9026 CASTLE HARBOR CIRCLE VERO BEACH, FL 32963
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP KASTENSMIDT, JIM 866 34TH AVENUE VERO BEACH, FL 32960
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S MCDONALD, RUTH 610 39TH COURT S.W. VERO BEACH, FL 32968
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T WILHELM, JERRY E 465 VENTURA PL. VERO BEACH, FL 32963
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

000000578700
01/09/07-80039-022 61.25

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Jerry E. Wilhelm

JERRY E. WILHELM

1-4-07

772-234-6450

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #