

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000002494

FILED
Apr 11, 2005
Secretary of State

Entity Name: INDIAN RIVER MOUNTAIN BIKE ASSOCIATION, INC.

Current Principal Place of Business:

405 LIVE OAK DRIVE
VERO BEACH, FL 32963

New Principal Place of Business:

Current Mailing Address:

405 LIVE OAK DRIVE
VERO BEACH, FL 32963

New Mailing Address:

FEI Number: 20-0841333

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BARRY G. SEGAL, P.A.
2801 OCEAN DRIVE
SUITE 204
VERO BEACH, FL 32963 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: P () Delete
Name: HARROW, LIBBY
Address: 725 HIBISCUS LANE
City-St-Zip: VERO BEACH, FL 32963

Title: VP () Delete
Name: WETHERALD, RICHARD
Address: 107 FRIAR COURT
City-St-Zip: SEBASTIAN, FL 32958

Title: S () Delete
Name: GLAAB, LANCE
Address: 405 LIVE OAK DRIVE
City-St-Zip: VERO BEACH, FL 32963

Title: T (X) Delete
Name: KIESSEL, CHRIS
Address: 478 20TH AVENUE S.W.
City-St-Zip: VERO BEACH, FL 32962

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change () Addition
Name: KIESSEL, CHRIS
Address: 478 20TH AVE SW
City-St-Zip: VERO BEACH, FL 32962

Title: S, T (X) Change () Addition
Name: GLAAB, LANCE
Address: 405 LIVE OAK DRIVE
City-St-Zip: VERO BEACH, FL 32963

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 Section 119.07(3)(i), 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: LANCE H GLAAB

S

04/11/2005

Electronic Signature of Signing Officer or Director

Date