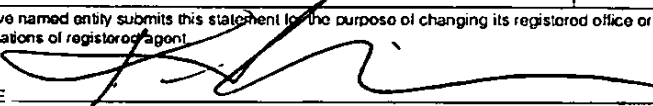


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 09, 2007 8:00 am
Secretary of State

02-22-2007 90018 036 ****61.25

DOCUMENT # N06000006715 1. Entity Name TAXPAYERS ASSOCIATION OF INDIAN RIVER COUNTY, INC.					
Principal Place of Business P.O. BOX 1751 VERO BEACH FL 32961-1751				Mailing Address P.O. BOX 1751 VERO BEACH FL 32961-1751	
2. Principal Place of Business - No P.O. Box # 		3. Mailing Address 			
Suite, Apt. #, etc. 		Suite, Apt. #, etc. 			
City & State 		City & State 		4. FEI Number 59-2551431	
Zip 		Country 		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent MILLER, KEVIN M 902 CROWN ST SEBASTIAN FL 32958				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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 returns when registering) 2/9/2007 DATE					
FILE NOW: FEE IS \$61.25 Due By May 1, 2007		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees		Make Check Payable to Florida Department of State	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	P	NAME	WEISE, DUANE M	TITLE	PRESIDENT
STREET ADDRESS		STREET ADDRESS	8485 SEACREST DR	STREET ADDRESS	ROSE SPYTER
CITY - ST - ZIP		CITY - ST - ZIP	VERO BEACH FL 32963	CITY - ST - ZIP	2496 3RD PLACE SW VERO BEACH, FL. 32962
TITLE	V	NAME	GRANSE, JAMES M	TITLE	
STREET ADDRESS		STREET ADDRESS	2364 57TH CIRCLE BLDG 5	STREET ADDRESS	
CITY - ST - ZIP		CITY - ST - ZIP	VERO BEACH FL 32966	CITY - ST - ZIP	
TITLE	V	NAME	MILLER, KEVIN M	TITLE	
STREET ADDRESS		STREET ADDRESS	902 CROWN ST	STREET ADDRESS	
CITY - ST - ZIP		CITY - ST - ZIP	SEBASTIAN FL 32958	CITY - ST - ZIP	
TITLE	S	NAME	JOHNSON, ROBERT D	TITLE	SECRETARY
STREET ADDRESS		STREET ADDRESS	535 39TH ST SW	STREET ADDRESS	MARY BETH McDONALD
CITY - ST - ZIP		CITY - ST - ZIP	VERO BEACH FL 32968	CITY - ST - ZIP	101 INDIAN MOUND TRAIL VERO BEACH, FL 32963
TITLE	T	NAME	MILLER, KENNETH E	TITLE	
STREET ADDRESS		STREET ADDRESS	6458 55TH SO	STREET ADDRESS	
CITY - ST - ZIP		CITY - ST - ZIP	VERO BEACH FL 32967	CITY - ST - ZIP	
TITLE		NAME		TITLE	
STREET ADDRESS		STREET ADDRESS		STREET ADDRESS	
CITY - ST - ZIP		CITY - ST - ZIP		CITY - ST - ZIP	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 life empowered.					
SIGNATURE  KENNETH E. MILLER 02/09/07 772-559-5260 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					