

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000006953

FILED  
Jul 09, 2007  
Secretary of State

Entity Name: INDIAN RIVER COUNTY U.S.B.C., INC.

## Current Principal Place of Business:

6725 51ST AVENUE  
VERO BEACH, FL 32967

## New Principal Place of Business:

## Current Mailing Address:

6725 51ST AVENUE  
VERO BEACH, FL 32967

## New Mailing Address:

FEI Number: 65-1276517      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

## Name and Address of Current Registered Agent:

TRAMEL, SR., WILLIAM L  
6725 51ST AVENUE  
VERO BEACH, FL 32967      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: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES ( ) Change (X) Addition  
Name: LINCOLN, RAY  
Address: 7870 126TH STREET  
City-St-Zip: SEBASTIAN, FL 32958

Title: VICE ( ) Change (X) Addition  
Name: YON, MARY  
Address: 8745 24TH STREET  
City-St-Zip: VERO BEACH, FL 32966

Title: DIR ( ) Change (X) Addition  
Name: CRISTOFORI, CLAUDIO  
Address: 486 SEAGRASS AVENUE  
City-St-Zip: SEBASTIAN, FL 32958

Title: MGR ( ) Change (X) Addition  
Name: TRAMEL, WILLIAM  
Address: 6725 51ST AVENUE  
City-St-Zip: VERO BEACH, FL 32967

Title: DIR ( ) Change (X) Addition  
Name: KOVAS, GABY  
Address: 620 BAREFOOT BOULEVARD  
City-St-Zip: BAREFOOT BAY, FL 32976

Title: DIR ( ) Change (X) Addition  
Name: SOCCI, PETE  
Address: 126 MIDVALE TERRACE  
City-St-Zip: SEBASTIAN, FL 32958

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: WILLIAM L. TRAMEL

MGR

07/09/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date