2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 31, 2009
Secretary of State

DOCUMENT# N06000012210

Entity Name: INDIAN RIVER FLYING CLUB, INC.

Current Principal Place of Business:

371 CRESTVIEW ST., NE
PALM BAY, FL 32907

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 100053
PALM BAY, FL 32910

New Mailing Address:

FEI Number: 59-3300751 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BEARD, DANIEL S
371 CRESTVIEW ST., NE
PALM BAY, FL 32907 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: PD ( ) Delete
Name: PEDERSEN, ANDERS
Address: 1398 MEADOWBROOK RD.
City-St-Zip: PALM BAY, FL 32905

Title: VD ( ) Delete
Name: RACIK, KENNETH
Address: 806 DRACO DR.
City-St-Zip: BAREFOOT BAY, FL 32976

Title: TD ( ) Delete
Name: BEARD, DANIEL S
Address: 371 CRESTVIEW ST., NE
City-St-Zip: PALM BAY, FL 32907

Title: SD ( ) Delete
Name: JENSEN, PETER
Address: 4078 WILKES DR.
City-St-Zip: MELBOURNE, FL 32901

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: PEDERSEN, ANDERS
Address: 3827 PEACOCK DRIVE
City-St-Zip: MELBOURNE, FL 32904

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 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: DANIEL S. BEARD TD 03/31/2009

Electronic Signature of Signing Officer or Director — Date