2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

Feb 19, 2008 8:00 am **Secretary of State DOCUMENT # N15913** 02-19-2008 90014 020 ****61.25 THE INDIAN RIVER GENEALOGICAL SOCIETY, INC. Principal Place of Business Mailing Address INDIAN RIVER COUNTY LIBRARY P.O. BOX 1850 16TH AVENUE & 21ST STREET VERO BEACH, FL 32961-1850 US VERO BEACH, FL 32961 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 02012008 Chg-NP CR2E037 (12/06) 4. FEI Number 59-2285878 City & State City & State Applied For Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name KERSEY, NOEL Street Address (P.O. Box Number is Not Acceptable) 1236 42ND AVE. VERO BEACH, FL 32960 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. THOMAS F. GARVEY Filing Fee is \$61.25 9. Election Campaign Financing Make check payable to \$5.00 May Be Florida Department of State Trust Fund Contribution. Due by May 1, 2008 Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. PD TITLE Delete TITLE ☐ Addition KERSEY, NOEL NAME NAME STREET ADDRESS 1236 42ND AVE. STREET ADDRESS CITY-ST-ZIP VERO BEACH, FL 32960 CITY-ST-ZIP Delete TITLE TIT! F ☐ Change ☐ Addition RUNNELS, JAMES 4180 60TH COURT WEBBER, JEANETTE NAME NAME 7460 CYPRUS BEND MANOR STREET ADDRESS STREET ADDRESS VERO BEACH, FL 32963 VERO BEACH, FL 32967 CITY-ST-ZIF CITY-SI-7IP ☐ Delete ☐ Addition GARVEY, THOMAS NAME NAME 2250 SOUTHWINDS BLVD, APT 326 STREET ADDRESS STREET ADDRESS VERO BEACH, FL 32963 CITY-ST-7IP CITY-ST-7IP TITLE Delete TITLE ☐ Change Addition CHAZOTTE, DIANE NAME NAME STREET ADDRESS 2145 BUENA VISTA BLVD. STREET ADDRESS CITY-ST-ZIP VERO BEACH, FL 32960 CITY-ST-ZIP TITLE ☐ Defete TITLE Addition DAVIS, CYNTHIA J NAME NAME 21752 73RD MANOR STREET ADDRESS STREET ADDRESS VERO BEACH, FL 32966 CITY-ST-7IP CITY-ST-ZIP TITLE Defete TITLE ☐ Addition NHELAN, CAROL 4501 EIGHTH LANE NAME NAME STREET ADDRESS STREET ADDRESS

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 are 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.

CITY-ST-ZIP

CITY-ST-7/P

ED NAME OF SIGNING OFFICER OR DIRECTOR

FILED