

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N48322

FILED
Jan 05, 2009
Secretary of State

Entity Name: INDIAN RIVER RIDING CLUB, INC.

Current Principal Place of Business:

6355 37TH ST
VERO BEACH, FL 32966 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 6322
VERO BEACH, FL 329616322 US

New Mailing Address:

FEI Number: 65-0050239

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SIMRIN, PATRICIA H.
720-16TH AVE.
VERO BEACH, FL 32962 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: D () Delete
Name: MACWILLIAM, ALEX
Address: 266 EGVET LANE
City-St-Zip: ORANGE CITY, FL 32763

Title: P () Delete
Name: OVERTON, PATRICA
Address: P.O. BOX 6821
City-St-Zip: VERO BEACH, FL 32967

Title: D () Delete
Name: ROAMS, SAM
Address: 6600 4TH STREET
City-St-Zip: VERO BEACH, FL 32968

Title: P () Delete
Name: SIMRIN, PAT
Address: 720 16TH AVE
City-St-Zip: VERO BEACH, FL

Title: TD () Delete
Name: STANFORD, FAYE
Address: 5855 3330 STREET
City-St-Zip: VERO BEACH, FL 32966

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: MACWILLIAM, ALEX
Address: 266 EGRET LANE
City-St-Zip: VERO BEACH, FL 32963

Title: D (X) Change () Addition
Name: OVERTON, PATRICA
Address: P.O. BOX 6821
City-St-Zip: VERO BEACH, FL 32967

Title: P (X) Change () Addition
Name: SETON, BECKY
Address: 700 21ST CT
City-St-Zip: VERO BEACH, FL 32962

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: FAYE STANFORD

TD

01/05/2009

Electronic Signature of Signing Officer or Director

Date