## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N9500000630

FILED Apr 15, 2009 Secretary of State

Entity Name: CULTURAL COUNCIL OF INDIAN RIVER COUNTY, INC.

Current Principal Place of Business:			New Princ	New Principal Place of Business:		
2036 14TH #103						
VERO BEA	ACH, FL 32960	US				
Current Mailing Address:			New Maili	New Mailing Address:		
2036 14TH #103		110				
VERO BEA	ACH, FL 32960	US				
FEI Number:	59-3299133	FEI Number Applied For ( ) FEI	l Number Not Appl	licable ( ) Certificate of Status Desired ( )		
Name and	Address of C	urrent Registered Agent:	Name and	Address of New Registered Agent:		
2036 14TH #103	ARY JAYNE EX I AVENUE ACH, FL 32963					
	named entity s of Florida.	ubmits this statement for the purpo	se of changing i	ts registered office or registered agent, or both,		
SIGNATUF	RE:					
	Electroni	c Signature of Registered Agent		Date		
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	MRS. () SMITH, SUSAN 1342 RIVERSID VERO BEACH, F	E LANE	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition		
Fitle: Name: Address: City-St-Zip:	* *		Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	, ,		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition		
Title: Name: Address: City-St-Zip:	MR. () SOLARI, ROBER 730 PAINTED BU VERO BEACH, F	JNTING LANE	Title: Name: Address: City-St-Zip:	MRS. (X) Change ( ) Addition FINIZIO, DENISE TREAS. 1250 LANCONIA STREET SEBASTIAN, FL 32958 US		
Title: Name: Address: City-St-Zip:	MS. () FISCHER, ELLE 1580 5TH COUR VERO BEACH, F	T .	Title: Name: Address: City-St-Zip:	MRS. (X) Change ( ) Addition FORAGE, DARLENE SECR 1010 SOUTHLAKES WAY VERO BEACH, FL 32968 US		
Title: Name: Address: City-St-Zip:	MS () SEXTON, CHRIS PO BOX 2187 VERO BEACH, F		Title: Name: Address: City-St-Zip:	MS (X) Change ( ) Addition GRANDPIERRE, SUSAN BOD 765 OCRACOKE SQUARE SW VERO BEACH, FL 32968 US		

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: SUSAN SMITH MRS 04/15/2009