

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 07, 2005 08:00 AM
Secretary of State

DOCUMENT # N98000004984

1. Entity Name
INDIAN RIVER LAGOON ENVIROTHON, INC.



Principal Place of Business
210 ATLANTA AVE
STUART, FL 34994

Mailing Address
210 ATLANTA AVE
STUART, FL 34994

DO NOT WRITE IN THIS SPACE



01192005 No Chg-NP CR2E037 (10/03)

4. FEI Number
65-0940980

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

LAMARTINA, KATHRYN
210 ATLANTA AVE
STUART, FL 34994

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IN THIS SPACE**

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2005**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	BAKER, RICHARD
STREET ADDRESS	200 9 ST SE
CITY-ST-ZIP	VERO BEACH, FL 32962
TITLE	CD
NAME	LAMARTINA, KATHRYN
STREET ADDRESS	210 ATLANTA AVE
CITY-ST-ZIP	STUART, FL 34994
TITLE	TD
NAME	UNDERWOOD, ELIZABETH
STREET ADDRESS	5400 ST. JAMES DR
CITY-ST-ZIP	PORT SAINT LUCIE, FL 34983
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and 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.

SIGNATURE:

Kathryn Lamartina Kathryn Lamartina

Date

1/25/05 2600 x3003

Daytime Phone #