

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 24, 2004 8:00 am
Secretary of State

06-24-2004 90080 029 ***150.00

DOCUMENT # P00000034677 1. Entity Name INDIAN RIVER INVESTORS GROUP, INC.					
Principal Place of Business 1970 MICHIGAN AVE., BLDG. C COCOA, FL 32922			Mailing Address 1070 MICHIGAN AVE., BLDG. C COCOA, FL 32922		
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address 125 E. MERRITT ISLAND CSWY 209153			
City & State MERRITT ISLAND FL		City & State MERRITT ISLAND FL		4. FEI Number 59-3641158	
Zip 32952		Country USA		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent SOILEAU, JOHN L 1970 MICHIGAN AVE., BLDG. C COCOA, FL 32922				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL 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.					
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
FILE NOW!!! FEE IS \$150.00 Due by September 8, 2004		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FISCHER, CHARLES A P.O. BOX 560206 ROCKLEDGE, FL 329560206	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FISCHER, CHARLES A 125 E. MERRITT ISLAND CSWY #209153 MERRITT ISLAND, FL 32952	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FISCHER, MONICA L P.O. BOX 560206 ROCKLEDGE, FL 329560206	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FISCHER, MONICA L 125 E. MERRITT ISLAND CSWY #209153 MERRITT ISLAND, FL 32952	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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 607, 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:  CHARLES FISCHER PRES. Date 6-21-04 Daytime Phone # 321 459 9998					