

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000110016

Entity Name: INDIAN RIVER THERAPY INC.

FILED  
Apr 28, 2006  
Secretary of State

## Current Principal Place of Business:

1850 37TH STREET - SUITE 301  
VERO BEACH, FL 32960 US

## New Principal Place of Business:

PO BOX 700005  
WABASSO, FL 32970 US

## Current Mailing Address:

1000 VIRGINIA AVE.  
FT. PIERCE, FL 32892 US

## New Mailing Address:

PO BOX 700005  
WABASTIAN, FL 32970 US

FEI Number: 52-2402641

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

DUKE, DEBY Y  
1000 VIRGINIA AVE.  
FT. PIERCE, FL 32892 US

## Name and Address of New Registered Agent:

DUKE, DEBY Y  
PO BOX 700005  
WABASSO, FL 32970 US

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: DEBY DUKE

04/28/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PRES ( ) Delete  
Name: DUKE, DEBY Y  
Address: 1000 VIRGINIA AVE.  
City-St-Zip: FT. PIERCE, FL 34982 US

Title: SEC ( ) Delete  
Name: KRISTENSEN, LILLIAN  
Address: 1000 VIRGINIA AVE  
City-St-Zip: FT., PIERCE, FL 34982

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change ( ) Addition  
Name: DUKE, DEBY Y  
Address: PO BOX 700005  
City-St-Zip: WABASSO, FL 32970 US

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DEBY DUKE

PRES

04/28/2006

Electronic Signature of Signing Officer or Director

Date