2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000056872

Entity Name: INDIAN RIVER VENTURES, INC.

FILED Mar 31, 2004 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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2855 N A1A HIGHWAY

UNIT A

INDIALANTIC, FL 32903 US

New Mailing Address: Current Mailing Address:

2855 N A1A HIGHWAY **UNIT A**

INDIALANTIC, FL 32903 US

FEI Number: 59-3422888 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

TYMN, SANDRA J 2855 N A1A HIGHWAY **UNIT A** INDIALANTIC, FL 32903 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:

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DCP () Delete TYMN, GREGORY A Name: 2855 N A1A HWY UNIT A Address: City-St-Zip:

INDIALANTIC, FL 32903

Title: DV () Delete TYMN, SANDRA J Name: 2855 N A1A HWY UNIT A Address: INDIALANTIC, FL 32903 City-St-Zip:

() Delete Title: TYMN, MATTHEW T Name: 628 PRINCE DRIVE Address: City-St-Zip: GREENWOOD, IN 46142

Title: () Delete TYMN, ADAM M Name: Address:

5568 FORESTHILL STREET City-St-Zip: LITTLETON, CO 80210

Title: (X) Change () Addition

TYMN, GREGORY A Name: 2855 N A1A HWY UNIT A Address: City-St-Zip: INDIALANTIC, FL 32903 US

Title: DV (X) Change () Addition

TYMN, SANDRA J Name: 2855 N A1A HWY UNIT A Address: City-St-Zip: INDIALANTIC, FL 32903 US

Title: (X) Change () Addition

TYMN, MATTHEW T Name: 628 PRINCE DRIVE Address:

City-St-Zip: GREENWOOD, IN 46142 US

Title: (X) Change () Addition

TYMN, ADAM M Name: Address: 2855 N A1A HWY UNIT A City-St-Zip: INDIALANTIC, FL 32903 US

I hereby certify that the information supplied with this filing does not qualify for the 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 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: GREGORY A. TYMN **PRES** 03/31/2004