2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S20937

Entity Name: INDIAN RIVER FLYING CLUB, INC.

FILED Mar 06, 2006 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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P.O. BOX 100053

PALM BAY, FL 329100053 US

Current Mailing Address: New Mailing Address:

P.O. BOX 100053

PALM BAY, FL 329100053 US

FEI Number: 65-0242129 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:

WHALEN, BOB X
318 W GEORGETOWN
MELBOURNE, FL 32901 US
BEARD, DANIEL S
371 CRESTVIEW ST., NE
PALM BAY, FL 32907 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: DANIEL S. BEARD 03/06/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: TD () Delete Title: TD (X) Change () Addition Name: BEARD, DANIEL Name: BEARD, DANIEL S
Address: 371 CRESTVIEW ST NE BEARD, DANIEL S
371 CRESTVIEW ST NE

Address: 371 CRESTVIEW ST NE Address: 371 CRESTVIEW ST N City-St-Zip: PALM BAY, FL 32907 City-St-Zip: PALM BAY, FL 32907

Title: VD () Delete Title: VD (X) Change () Addition

 Name:
 RAEIK, KENNETH
 Name:
 RACIK, KENNETH

 Address:
 329 ARALONE RD
 Address:
 806 DRACO DR

 City-St-Zip:
 PALM BAY, FL 32907
 City-St-Zip:
 BAREFOOT BAY, FL 32976

Title: PD () Delete Title: () Change () Addition

Name: PEDERSEN, ADDRESS Name:

 Name.
 PEDERSEN, ANDERS
 Name.

 Address:
 1398 MEADOWBROOK RD
 Address:

 City-St-Zip:
 PALM BAY, FL 32905
 City-St-Zip:

Title: SD () Delete Title: () Change () Addition

 Name:
 MAY, JEFFREY
 Name:

 Address:
 1695 GUAVA AVE
 Address:

 City-St-Zip:
 MELBOURNE, FL 32935
 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: DANIEL S. BEARD TD 03/06/2006