

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 18, 2009
Secretary of State

DOCUMENT# N42113

Entity Name: IAC CHAPTER 89, INC.

Current Principal Place of Business:

IAC CHAPTER 89, INC.
8780 SE 70TH TERRACE
OCALA, FL 34472 US

New Principal Place of Business:

Current Mailing Address:

IAC CHAPTER 89, INC.
8780 SE 70TH TERRACE
OCALA, FL 34472 US

New Mailing Address:

FEI Number: 59-3047418 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

WEAVER, FREDERICK G
8780 SE 70TH TERRACE
OCALA, FL 34472 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

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: SEBEXEN, RALPH H
Address: 8927 SE 72ND AVE
City-St-Zip: Ocala, FL

Title: D () Delete
Name: GUNNOE, JAMES E JR
Address: 9479 SE 70TH TERRACE
City-St-Zip: Ocala, FL 34472

Title: D () Delete
Name: CAMPBELL, KEVIN S
Address: 8777 SE 71 COURT
City-St-Zip: Ocala, FL 34472

Title: D () Delete
Name: PARKER, RAYMOND L
Address: 9180 SE 70 TERR
City-St-Zip: Ocala, FL

Title: D () Delete
Name: BUREL, ALVIN B
Address: 9451 S.E. 72ND AVE.
City-St-Zip: Ocala, FL

Title: T () Delete
Name: WEAVER, FREDERICK G
Address: 8780 SE 70TH TERRANCE
City-St-Zip: Ocala, FL 34472

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: FREDERICK G. WEAVER

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05/18/2009

Electronic Signature of Signing Officer or Director

_____ Date