FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(0)

FILED Feb 24 1998 8:00am Secretary of State

ADULT LITERACY SERVICE OF INDIAN RIVER COUNTY, I NC.						
Principal Place of Business		Mailing Address	Mailing Address		1 100 THE COURT HOUSE WITH BURGE WITH STORY BURGE BURG	
1600 21ST STREET VERO BEACH FL 32960		1600 21ST STREET VERO BEACH FL 32960			Date Incorporated or Qualified 10/20/1975 FEI Number	Applied For
4 0: : 10:					59-1987210	Not Applicable
2. Principal Place of Business 21		2e. Mailing Address 26	26		5. Certificate of Status Desired	\$8.75 Additional Fee Required
Suite, Apt. #, etc.		Suite, Apt. #, etc.			6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
City & State		City & State			7. Is this nonprofit corporation a homeowners association?	
Zip 24	Country 25	Zip 30	Country		This corporation owes or has paid the c Personal Property Tax due June 30.	urrent year Intengible
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent		
			81	Name		
BURNS, JOHN 1600 21ST ST			82 Street Address (P.O. Box Number is Not Acceptable)			
VERO BCH FL 32980			83			
			84	,	F	
11. Pursuant i office or ri agent. Lai	to the provisions of Sections egistered agent, or both, in m familiar with, and accept	s 617.0502 and 617.1508, Florida Statutes, the State of Florida. Such change was auth the obligations of, Section 617.0503, Florida	the above orized by a Statutes	i-named corpo the corporation.	oration submits this statement for the purpose on's board of directors. I hereby accept the ap	of changing its registered pointment as registered
SIGNATURE Signature, typod or printed narrix of registered agent and little if applicable (NOTE: Registered Agent signature required when reinstating) DATE						
12.		CERS AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AN	ID DIRECTORS IN 12
TITLE	VPD	DELETE	1.1 TITLE	TK	REASURER	Change Addition
NAME	STORK, CARMEN		1.2 NAME	Ro	BERT M. CIMINO	
STREET ADDRESS	2900-59TH AVE		1.3 STREET	ADDRESS 71	6-32nd Terrace	

Vero Beach, FL 32968 VERO BEACH FL CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE ☐ Change ■ Addition TITLE 2.1 TITLE MARKS, ROBERT B 2.2 NAME NAME 585 FOX RUN CW STREET ADDRESS 2.3 STREET ADDRESS 2. 4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE NAME MITCHELL, JOYCE 3.2 NAME 640-FOX-TRAIL-6W STREET ADORESS 3.3 STREET ADDRESS VERO BEACH FL CITY-ST-ZIP 3.4. CITY - \$T - ZIP DELETE Change Addition TITLE 4.1 TITLE **BURNS, JOHN** 4. 2 NAME STREET ADDRESS **1811 E SANDPOINTE PL** 4.3 STREET ADDRESS VERO BEACH FL CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE ☐ Change Addition TITLE 5.1 TITLE 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE ☐ Change ■ Addition TITLE 6.1 TITLE 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

6.4 CITY-ST-ZIP 14. 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 annual report or supplemental annual 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 receive or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changer, on on a attachment with an address.

SIGNATURE:

778 2233