FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT

1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

MAY 11 8:15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **J61820** **(3)**

1. Corporation Name

DJ OF INDIAN RIVER COUNTY, INC.

Principal Place of Business	Mailing Address
DJ OF INDIAN RIVER COUNTY INC 5609 WINTER GARDEN PKWY FT PIERCE FL 34951 US	DJ OF INDIAN RIVER COUNTY INC 5609 WINTER GARDEN PKWY FT PIERCE FL 34951 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **03/09/1987**

3a. Date of Last Report: **05/01/1994**

2. Principal Place of Business — 21

2a. Mailing Address — 26

Suite, Apt. #, etc. — 22 / 27

City & State — 23 / 28

Zip — 24 / County — 25 / Zip — 29 / County — 30

4. FEI Number: **59-2801144** ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation is subject to chapter 220 of the Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

COLLINS, GEORGE G., JR.
756 BEACHLAND BLVD
VERO BEACH FL 32960

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City — **FL** — 85 Zip Code

11. Pursuant to the provisions of Section 607.0505 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 19
01 Title	P	☐ Change ☐ Addition
02 Name	ELROD, DANIEL F.	
03 Street Address	5609 WINTER GARDEN PKWY.	
04 City-St-Zip	FORT PIERCE FL	
05 Title	ST	☐ Change ☐ Addition
06 Name	ELROD, JULIA K.C.	
07 Street Address	5609 WINTER GARDEN PKWY.	
08 City-St-Zip	FORT PIERCE FL	
09 Title		☐ Change ☐ Addition
10 Name		
11 Street Address		
12 City-St-Zip		
13 Title		☐ Change ☐ Addition
14 Name		
15 Street Address		
16 City-St-Zip		
17 Title		☐ Change ☐ Addition
18 Name		
19 Street Address		
20 City-St-Zip		
21 Title		☐ Change ☐ Addition
22 Name		
23 Street Address		
24 City-St-Zip		

14. I/We hereby certify that the information supplied with this filing is validly furnished and does not qualify 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 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 in Block 1, 11 or Block 14 if changed, or on an attachment with an address.

SIGNATURE: Julia K.C. Elrod — Julia K.C. Elrod Secty — 5-11-95 — 407-464-4562

(SIGNATURE AND TYPED OR PRINTED NAME OF DIRECTOR OR OFFICER OR AGENT) — (Date) — (Daytime Phone #)

0382662 CP