FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

N34607 **DOCUMENT #**

(4)

VIERA EAST COMMUNITY ASSOCIATION, INC.

Country

25

Principal Place of Business 7380 MURRELL RD. STE 201 MELBOURNE FL 32940

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

21

22

23

24

Mailing Address

2a. Mailing Address

City & State

Zip

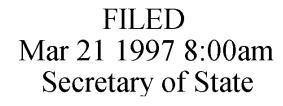
Suite, Apt. #, etc.

26

28

29

7380 MURRELL RD. STE 201 MELBOURNE FL 32940-7947





Yes No

8. This corporation has liability for intangible tax under s. 199.032,

3a. Date of Last Report 05/01/1996

Applied For

\$8.75 Additional

Fee Required

\$5.00 May Be

Added to Fees

Not Applicable

3. Date Incorporated or Qualified 10/04/1989

5. Certificate of Status Desired

6. Election Campaign Financing

Trust Fund Contribution

4. FEI Number 59-3012724

Florida Statutes

9, Name and Address of Current Hegistered Agent			10. Name and Address of New Registered Agent					
		81	Name					
BLAKE, R. MASON 7380 MURRELL RD, STE 201 MELBOURNE FL 32940			82 Street Address (P.O. Box Number is Not Acceptable)					
			Strate Contract Contr					
		84	City		85	Zip C	'orlo	
		64	City	VIERA FL	_ 85	zip C	ode	
11. Pursuant to the provisions of Sections 617,0502 and 617,1508, 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 617.0503, Florida Statutes.								
SIGNATURE								
		stered Ape	ent signatur	re required when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AN	D DIDEC	TOD!	2 161 40	
12.	·	1.1 TITLE		ADDITIONS/CHANGES TO OFFICERS AN	Cha		Addition	
i i	HILL BEALBAD				[] VIII	ange	(E) NOURION	
NAME		1,2 NAME						
STREET ADDRESS	MEDA EL		ADDRESS			>	24/2	
CITY-ST-ZIP	,	1.4 CITY - S	T-ZIP		T 1 01	04	720	
THILE		2.1 TITLE			∐ Cha	inge	Addition	
NAME	• • • • • • • • • • • • • • • • • • •	2.2 NAME						
STREET ADDRESS		2.3 STREET	ADDRESS	•		2	3042	
City-St-7iP		2. 4 CITY -	ST-ZIP		p.,		27/0	
THE		3.1 THLE			∐ Cha	inge	Addition	
NAME		3.2 NAME						
STREET ADORESS	1	3.3 STREE1	ADDRESS			9	301/2	
CITY -ST-ZIF		3.4. CITY -	ST - ZIP				2770	
TITLE	D DELETE	4.1 TITLE			Chi	ange	Addition	
NAME	MARTELL, PAUL	4. 2 NAME						
STREET ADDRESS	7380 MURRELL ROAD, SUITE 201	4.3 STREET	ADDRESS					
CITY-ST 7IP	VIERA FL	4.4 CITY - 9	ST-ZIP		_		_	
TITLE	D DELETE :	5.1 TITLE			Cha	ange	Addition	
NAME	STEVE JOHNSON	5.2 NAME						
STREET ADDRESS	7380 MURRELL ROAD, SUITE 201	5.3 STREET	ADDRESS			9		
CHTY - ST - ZIP	LOCAL FA	5.4 CITY- S	ST-ZIP			5.	940	
TILLE	☐ DELETE E	6.1 TITLE			Ch	ange	Addition	
NAME		6.2 NAME						
STREET ADDRESS		63 STREET	ADDRESS					
City-St-Zip		6.4 CITY - 9						
14. I do he eny 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 eath; 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 in Block 12 or Block 13 if changed, or on an attachment with an address.								
SIGNATURE: WERE EAST COMMUNITY ASSOC., INC. 3/18/97 (407) 2/2-1200								
SIGNATURE: O. Dele Daytime Phono F 2019845								
Charles and a transfer of a principle of a principl								

Country

30