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Feb 20 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT
1997

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

DOCUMENT # **N46161** **(8)**

1. Corporation Name

THE EDUCATION FOUNDATION OF INDIAN RIVER COUNTY, INC.

Principal Place of Business	Mailing Address
PO BOX 7046 VERO BEACH FL 32961	PO BOX 7046 VERO BEACH FL 32961-7046

3. Date Incorporated or Qualified: **11/22/1991**
3a. Date of Last Report: **03/07/1996**

2. Principal Place of Business — 21: Suite, Apt. #, etc — 22: City & State — 23: Zip — 24: Country — 25:

2a. Mailing Address — 26: Suite, Apt. #, etc. — 27: City & State — 28: Zip — 29: Country — 30:

4. FEI Number: **59-3118402** ☐ 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 has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

9. **Name and Address of Current Registered Agent**

HOPKINS, SUSAN
3211 OCEAN DRIVE
VERO BEACH FL 32963

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 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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	FELTEN, KEN		1.2 NAME		
STREET ADDRESS	2911 CARDINAL DRIVE		1.3 STREET ADDRESS		
CITY-ST-ZIP	VERO BEACH FL		1.4 CITY-ST-ZIP		
TITLE	CD	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	HOPKINS, SUSAN		2.2 NAME		
STREET ADDRESS	3211 OCEAN DRIVE		2.3 STREET ADDRESS		
CITY-ST-ZIP	VERO BEACH FL		2.4 CITY-ST-ZIP		
TITLE	D	☒ DELETE	3.1 TITLE	PRESIDENT	☐ Change ☒ Addition
NAME	PRICE, CLAY		3.2 NAME	BLOCK, SAM	
STREET ADDRESS	1623 US 1, SUITE B4		3.3 STREET ADDRESS	4925 4th STREET	
CITY-ST-ZIP	SEBASTIAN FL		3.4 CITY-ST-ZIP	VERO BEACH, FL	
TITLE	D	☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME	MOORE, JOHN I		4.2 NAME		
STREET ADDRESS	756 BEACHLAND BLVD.		4.3 STREET ADDRESS		
CITY-ST-ZIP	VERO BEACH FL		4.4 CITY-ST-ZIP		
TITLE	SD	☒ DELETE	5.1 TITLE	SECRETARY	☐ Change ☒ Addition
NAME	BAILEY, SUSAN		5.2 NAME	LEACH, NANCY	
STREET ADDRESS	1415 43RD COURT		5.3 STREET ADDRESS	416 HOLLY ROAD	
CITY-ST-ZIP	VERO BEACH FL		5.4 CITY-ST-ZIP	VERO BEACH, FL 32963	
TITLE	TD	☒ DELETE	6.1 TITLE	TREASURER	☐ Change ☒ Addition
NAME	ZWEMER, AMY		6.2 NAME	COLTON, REBECCA	
STREET ADDRESS	495 33RD AVE		6.3 STREET ADDRESS	4890 13th LANE	
CITY-ST-ZIP	VERO BCH FL		6.4 CITY-ST-ZIP	VERO BEACH, FL 32966	

CR2E037 (9/96)

14. I do 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 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: Rebecca B. Colton DIRECTOR Rebecca B. Colton 2/13/97 561-231-1440
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone # 0020686