

FILE NOW: FILING FEE IS \$61.25

FILED  
Jun 13 1997 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT <b>1997</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # N96000001938 (7)**  
1. Corporation Name  
**THE ISLAND CLUB OF VERO BEACH HOMEOWNERS ASSOCIATION, INC.**



Principal Place of Business <b>10 CENTRAL PARKWAY SUITE 130 STUART FL 34994</b>	Mailing Address <b>10 CENTRAL PARKWAY SUITE 130 STUART FL 34994-5903</b>
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3. Date Incorporated or Qualified <b>04/11/1996</b>	3a. Date of Last Report
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2. Principal Place of Business 21. <b>Elliott Merrill Community Mgmt.</b> Suite, Apt. #, etc. 22. <b>1105 12<sup>th</sup> St.</b> City & State 23. <b>Vero Beach, FL</b> Zip 24. <b>32960</b> Country 25. <b>US</b>	2a. Mailing Address 26. <b>Elliott Merrill Comm. Mgmt.</b> Suite, Apt. #, etc. 27. <b>1105 12<sup>th</sup> St</b> City & State 28. <b>Vero Beach, FL</b> Zip 29. <b>32960</b> Country 30. <b>US</b>
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4. FEI Number <b>65-0699294</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00</b> May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent  
**HINES, PAUL K  
800 S.E. MONTEREY COMMONS BLVD.  
SUITE 200  
STUART FL 34996**

10. Name and Address of New Registered Agent  
81. Name  
**Richard D. Elliott**  
82. Street Address (P.O. Box Number is Not Acceptable)  
**Elliott Merrill Community Mgmt.**  
83. **1105 12<sup>th</sup> St**  
84. City  
**Vero Beach** FL 85. Zip Code  
**32960**

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 Richard D. Elliott DATE 3/18/97

12. OFFICERS AND DIRECTORS		
TITLE	PD	<input checked="" type="checkbox"/> DELETE
NAME	WILLIAMS, KEITH	
STREET ADDRESS	10 CENTRAL PARKWAY, SUITE 130	
CITY-ST-ZIP	STUART FL 34994	
TITLE	VD	<input checked="" type="checkbox"/> DELETE
NAME	BAUER, EDWARD	
STREET ADDRESS	10 CENTRAL PARKWAY, SUITE 130	
CITY-ST-ZIP	STUART FL 34994	
TITLE	VD	<input checked="" type="checkbox"/> DELETE
NAME	BARONE, STEVEN	
STREET ADDRESS	10 CENTRAL PARKWAY, SUITE 130	
CITY-ST-ZIP	STUART FL 34994	
TITLE	SD	<input checked="" type="checkbox"/> DELETE
NAME	TREADWELL, KATHRYN	
STREET ADDRESS	10 CENTRAL PARKWAY, SUITE 130	
CITY-ST-ZIP	STUART FL 34994	
TITLE	TD	<input checked="" type="checkbox"/> DELETE
NAME	KELLY, JOANNE	
STREET ADDRESS	10 CENTRAL PARKWAY, SUITE 130	
CITY-ST-ZIP	STUART FL 34994	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
1.1 TITLE	PD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	Mr. Jeffrey Thorson	
1.3 STREET ADDRESS	871 Island Club Square	
1.4 CITY-ST-ZIP	Vero Beach, FL 32963	
2.1 TITLE	TD	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	Robert Knight	
2.3 STREET ADDRESS	871 Island Club Square	
2.4 CITY-ST-ZIP	Vero Beach, FL 32963	
3.1 TITLE	SD	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	Linda Pelphrey	
3.3 STREET ADDRESS	871 Island Club Square	
3.4 CITY-ST-ZIP	Vero Beach, FL 32963	
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

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 supplement 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 Richard D. Elliott DATE 3/18/97

CFR2037 (9/96)