


FILE NOW: FILING FEE IS \$61.25

FILED  
Apr 27 1998 8:00am  
Secretary of State

|  |   |   |
|--|---|---|
| NONPROFIT<br>CORPORATION<br>ANNUAL REPORT<br><b>1998</b> |  | FLORIDA DEPARTMENT OF STATE<br><b>Sandra B. Mortham</b><br>Secretary of State<br>DIVISION OF CORPORATIONS |
|--|---|---|

DOCUMENT # **718671** (1)

1. Corporation Name  
**THE CMC ASSOCIATION OF VERO BEACH AND INDIAN RIVER COUNTY, INC.**

|  |  |
|--|--|
| Principal Place of Business<br><b>P.O. BOX 3381 BEACH STATION<br/>VERO BEACH FL 32964-0381</b> | Mailing Address<br><b>P.O. BOX 3381 BEACH STATION<br/>VERO BEACH FL 32964-0381</b> |
|--|--|



|   |  |
|---|--|
| 2. Principal Place of Business<br>21 Suite, Apt. #, etc.<br>22 City & State<br>23 Zip<br>24 Country | 2a. Mailing Address<br>25 Suite, Apt. #, etc.<br>27 City & State<br>28 Zip<br>29 Country |
|---|--|

|  |   |   |
|--|---|---|
| 3. Date Incorporated or Qualified<br><b>06/12/1970</b>   | 4. FEI Number<br><b>23-7089453</b>  | Applied For<br><input type="checkbox"/> Not Applicable  |
| 5. Certificate of Status Desired<br><input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>   | 6. Election Campaign Financing<br>Trust Fund Contribution <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b> | 7. Is this nonprofit corporation a homeowners association?<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
| 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |   |   |

9. Name and Address of Current Registered Agent

**GWATHMEY, LOMAX  
23 SEAHORSE LANE  
VERO BEACH FL 32900**

10. Name and Address of New Registered Agent

|                                  |   |    |                              |       |                             |
|----------------------------------|---|----|------------------------------|-------|-----------------------------|
| 81 Name<br><b>TENBUS, ROBERT</b> | 82 Street Address (P.O. Box Number Is Not Acceptable)<br><b>764 BANYAN ROAD</b> | 83 | 84 City<br><b>VERO BEACH</b> | 85 FL | 86 Zip Code<br><b>32963</b> |
|----------------------------------|---|----|------------------------------|-------|-----------------------------|

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 *[Signature]* **Robert Tenbus, President** DATE **04-13-98**

(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

|  |   |  |
|--|---|--|
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <b>D/P<br/>TENBUS, ROBERT M.<br/>764 BANYAN RD.<br/>VERO BCH, FL</b>          | <input type="checkbox"/> DELETE            |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <b>DST<br/>GWATHMEY, LOMAX<br/>23 SEA HORSE LANE<br/>VERO BCH, FL 32900</b>   | <input checked="" type="checkbox"/> DELETE |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <b>D/V<br/>ELWYN, WINNIE E.<br/>2096 WINDWARD WAY<br/>VERO BEACH FL 32963</b> | <input type="checkbox"/> DELETE            |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |   | <input type="checkbox"/> DELETE            |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |   | <input type="checkbox"/> DELETE            |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |   | <input type="checkbox"/> DELETE            |

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

|  |  |  |  |  |  |
|--|--|--|--|--|--|
| 1.1 TITLE<br>1.2 NAME<br>1.3 STREET ADDRESS<br>1.4 CITY-ST-ZIP | 2.1 TITLE<br>2.2 NAME<br>2.3 STREET ADDRESS<br>2.4 CITY-ST-ZIP | 3.1 TITLE<br>3.2 NAME<br>3.3 STREET ADDRESS<br>3.4 CITY-ST-ZIP | 4.1 TITLE<br>4.2 NAME<br>4.3 STREET ADDRESS<br>4.4 CITY-ST-ZIP | 5.1 TITLE<br>5.2 NAME<br>5.3 STREET ADDRESS<br>5.4 CITY-ST-ZIP | 6.1 TITLE<br>6.2 NAME<br>6.3 STREET ADDRESS<br>6.4 CITY-ST-ZIP |
|--|--|--|--|--|--|

**DST  
Ooty, Kevin S.  
411 Holly Road  
VERO BEACH, FL 32963**

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 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: *[Signature]* **Robert Tenbus** DATE **04-13-98** **561-562-0108**

CR2E037 (10/97)