## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT **CORPORATION** ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name 306799

HALE INDIAN RIVER GROVES, INC .

(8)

APPROVED AND

98 JUN -2 PH 12: 34

SECRETARY OF STATE TALLAHASSEE, FLORIDA



Principal Place of Business Mailing Address						F INDIAN ISTLE MORE ONLE HOUSE INDIA	i Bidil didil didil didil dibil	
U S HIGHWAY NO 1 P O BOX 217 WABASSO FL 32970		U S HIGHWAY NO 1 P O BOX 217 WABASSO FL 32970				DO NOT WRITE IN THIS SPACE		
WADAGOU FL 32#70		WINDHOOD FL SZBIU				3. Date Incorporated or Qualified		
_						07/01/1966		
· `	tace of Business	2a. Mailing Address				4. FEI Number	<del> </del>	plied For
Suite, Apt # etc.		Suite: Apt. #. etc.				59-1142796	<del></del>	t Applicable
22		27				5. Certificate of Status Desired	\$8.75 A	
City & State		City & State		8. Election Campaign Financing	\$5.00	<del></del>		
23		28				Trust Fund Contribution Added to Fees		
Zip	Country	Zφ		Country		8. This corporation owes or has paid the current year Intangible		
24	25	29	30	<u> </u>		Personal Property Tax due Juno 30.  Yes No		
	Name and Address of Current	Registered Agent	B1	Name				
HALE, STEPHEN C., JR. US HWY NO 1								
WABASSO FL				82 Street Addre		ss (P.O. Box Number is Not Acceptab	le)	
*117	DADOU I E			83				
					011		lan 7 c	
				84	City		FL 85 Zip C	ode
11. Pursuant to the provisions of Sections 607.05.02 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. Thereby accept the appointment as registered agent. Lam familiar with, and accept the obligations of Section 607.0505, Florida Statutes.								
SIGNATURE								
				Registered Agent signature requin			DATE	
12.	OFFICERS AND	DELETE	13,			ADDITIONS/CHANGES TO OFFIC	Change	S IN 12 Addition
NAME	4434 - 699644944		1.2 NAME				onange	
STREET ADDRESS 500 INDIAN HARBOR ROAD			13 STREET ADDRESS		ADDRESS			
CITY-ST-ZIP	VERO BEACH FL		1.4 CITY-ST-ZIP		ì			Ì
TITLE	PO	DELETE	21 TH			(C) (C) (C) (C) (C) (C)	Lhange	Addition
NAME	HALE, STEPHEN C. III		2.2 NA	M£		6000029 -06/05/	ifti⊠ic: [[⊡in 20010020	115
STREET ADDRESS	1160 ADMIRALS WALK		2.3 STREET ADDRESS		ADDRESS	・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・	).80 ****15	ו ממימ:
CITY+ST-ZIP	VERO BEACH FL		2.4 CITY-S		T-ZIP			
TITLE	DELETE			3 1 TITUE			☐ Change	☐ Addition
NAME HALE,MARY D			3.2 NAME					
STREET ADDRESS 500 INDIAN HARBOR ROAD VERO BEACH FL			3.3 STREET ADDRESS 3.4. CHY+ST-ZIP					
CITY-ST-ZIP TITLE	VD VD	☐ DELETE	4.1 TILLE		1- ZIP	<u> </u>	Change	Addition
NAME	KRETSCH, JAMES J.		4. 2 NAME					
STREET ADDRESS	610 GOLF VIEW DRIVE		4.3 STREE		ANDRESS			İ
CITY-ST-ZIP	VERO BEACH FL		4.4 Ci					
TITLE	D	DELETE	51 THE				Change	Addition
NAME			5.2 NA	ME				
STREET ADDRESS	ss P.O. BOX 3849 N/A 5		5.3 ST	REET	REET ADDRESS		ļ	
CITY+ST-ZIP	VERO BEACH FL 5.4		5.4 CI	Y - ST	- ZIP			
TITLE	DI.		6.1 TITLE				Change	Addition
NAME			6.2 NAME				1012 -	
STREET ADDRESS			6.3 STREET ADD		address		Billia	
CITY-ST-ZIP			6.4 CITY - ST - ZIP		- ZIP		\	

14. Thereby 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 self-incremental 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 of the regulater empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if changed or so in synaphrous with an address.

Stephen C. Hale III 4/23/98