

2001 UNIFORM BUSINESS REPORT (UBR)**FILED**
Jan 08, 2001 8:00 am
Secretary of State

01-08-2001 90030 012 ****61.25



DO NOT WRITE IN THIS SPACE

DOCUMENT # N97000006207			
1. Entity Name INDIAN RIVER LITERARY SOCIETY, INC.			
Principal Place of Business 755 BEACHLAND BLVD. VERO BEACH FL 32963		Mailing Address P.O. BOX 3308 VERO BEACH FL 32964	
2. Principal Place of Business Suite, Apt. #, etc. City & State Zip Country		3. Mailing Address Suite, Apt. #, etc. City & State Zip Country	
4. FEI Number 65-0794160		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent FENNELL, TODD W 979 BEACHLAND BLVD. VERO BEACH FL 32963		7. Name and Address of New Registered Agent Name: Vallar, Mary Beth Street Address (P.O. Box Number is Not Acceptable): 755 Beachland Blvd. City: Vero Beach FL Zip Code: 32963	
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.			
SIGNATURE <i>Mary Beth Vallar</i> Mary Beth Vallar, Secretary and Treasurer 1/3/01 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>			
FILE NOW: FEE IS \$61.25		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
Make Check Payable to Department of State			
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE: D COOPER, CHARLES F.X. (NA) VERO BEACH FL 32964 <input type="checkbox"/> Delete		TITLE: D/S/T Vallar, Mary Beth 755 Beachland Blvd. Vero Beach, FL 32963 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE: D TERRY, CHARLOTTE (NA) VERO BEACH FL 32964 <input type="checkbox"/> Delete		TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE: D BAUCHMAN, ROBERT W (NA) VERO BEACH FL 32964 <input type="checkbox"/> Delete		TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE: D CHENAULT, MARILYN (NA) VERO BEACH FL 32964 <input type="checkbox"/> Delete		TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE: D DU PONT, ALICE (NA) VERO BEACH FL 32964 <input type="checkbox"/> Delete		TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE: D FENNELL, TODD W (NA) VERO BEACH FL 32964 <input type="checkbox"/> Delete		TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition	

CR2E037 (10/00)

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.**SIGNATURE:** *Mary Beth Vallar* **Mary Beth Vallar** **1/3/01** **561-231-2400 X 319**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #