## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1996

DOCUMENT # 214131

(5)

1. Corporation Name

Principal Place of Business

INDIAN RIVER ENGINEERING, INC.

846 BANYAN ROAD P O BOX 3220 VERO BEACH FL 32964 Mailing Address

846 BANYAN ROAD P O BOX 3220 VERO BEACH FL 32964



| YENO DEMON FL 32304                        |   | VEHO BEACH FL 32964                    |                 |                    |                    | 3. 0                           | Date Incorporated <b>07/26/1958</b>  |                               | 3a. Date                       |                              | Report<br>/1995                  |          |
|--|---|--|-----------------|--------------------|--------------------|--------------------------------|--|-------------------------------|--------------------------------|------------------------------|----------------------------------|----------|
| 2. Principal Pla                           | ace of Business   | 2a. Mailing Address                    |                 |                    |                    | <b>4</b> . F                   | El Namber  |                               | 1                              |                              | Applied For                      |          |
| 21   |   | 26                                     | 26              |                    |                    |                                | 59-0866644   |                               |                                | Not Applicable               |                                  | е<br>е   |
| Suite, Apt. #                              | ∮, etc.   | Suite, Apt. #, etc 27                  | <u></u> Ի:−դ    |                    |                    | <b>5</b> . C                   | Dertificate of Statu   | s Desired                     | \$8.75 Additional Fee Required |                              |                                  |          |
| Orty & State                               |   | City & State                           | h               |                    |                    |                                | 6. Election Campaign Financing Trust Fund Contribution  S5.00 May Be Added to Fees                     |                               |                                |                              |                                  |          |
| Ζιρ<br><b>24</b>                           | Country 25  | Ζ <sub>(</sub> p                       | Country         |                    |                    | <b>8.</b> 7                    | B. This corporation has liability for intangible tax under s. 199.032, Florida Statutes     X Yes  No. |                               |                                |                              |                                  |          |
|  | 9. Name and Address of Curr   | ent Registered Agent                   |                 |                    |                    | 10. N                          | Name and Addre   | ss of New F                   | Registered #                   | gent                         |                                  | $\dashv$ |
|  |   |  |                 | 81                 | Name               |                                |  |                               |                                |                              |                                  |          |
| RYDER                                      | r,e a<br>Anyan RD   |  | 82 Street Addre |                    | Nddress (P.O       | ). Box Number is f             | Not Acceptab   | ole)                          |                                |                              | $\dashv$                         |          |
|  | BEACH FL 32960  |  |                 | 83                 |                    |                                |  |                               |                                |                              |                                  | -        |
|  |   |  |                 | 84                 | City               |                                |  |                               | <br>FI                         | 85                           | Zip Code                         |          |
| or registere                               | o the provisions of Sections 607.05<br>ed agent, or both, in the State of Flo<br>h, and accept the obligations of, Se | orida. Such change was authoriz        | red by the c    | ve na<br>verpoi    | med corpration's b | rporation sub<br>board of dire | bmits this stateme<br>ectors. Thereby ac   | nt for the pu<br>cept the app | rpose of cha<br>oint ment as   | .LL.<br>nging it<br>register | s registered officed agent. I am | se ]     |
| SIGNATURE _                                | Styriature, typed or pricted name of registered ag  | erráno tele italipilicatio. (NE        | TE: Registered  | Agerà :            | signature reg      | s journal With the rest co     | آود <sup>د</sup> ادار  |                               | DAN                            |                              |                                  | _        |
| 12.  |   | ND DIRECTORS                           | 13.             | ·                  |                    |                                | DDITIONS/CHAN  | GES TO OFF                    |                                | DIRLO                        | TORS IN 12                       | წ        |
| 1111.6                                     | PD  | DELETE                                 | 1. 1 T·         | TLE                | I                  | T                              |  |                               | ] Chang                        |                              | - 5                              |          |
| NAME                                       | RYDER,EDGAR A   |  | 1.2 NA          | EM                 |                    |                                |  |                               |                                |                              |                                  | 2        |
| STREET ADDRESS                             | 846 BANYAN RD   |  | 1.3 \$7         | REELA              | DDRESS             |                                |  |                               |                                |                              |                                  | E03      |
| CITY - ST - ZIP                            | VERO BEACH FL   |  | 1,40            |                    | -ZIP               |                                |  |                               |                                |                              |                                  | 12       |
| TITLE                                      | STD DELFTE  |  |                 | 2 1 1/11 5         |                    |                                |  |                               |                                | Chang                        | e 🔲 Addition                     |          |
| NAME                                       | RYDER, PAMELA A.  |  | 2 ? NA          | ME                 | İ                  |                                |  |                               |                                |                              |                                  |          |
| STREET ADDRESS                             | 846 BANYAN ROAD   |  | 2381            | 2.3 STREET ADORESS |                    |                                |  |                               |                                |                              |                                  |          |
| 011Y-S1-7IP                                | VERO BEACH FL   |  | 2401            | IY-\$1-            | - ZIF              |                                |  |                               |                                |                              |                                  |          |
| TITLE                                      | · · · · · · · · · · · · · · · · · · ·   | DELETE                                 |                 |                    | 1 TIFLE            |                                |  |                               |                                | Chang                        | e 🔲 Addition                     |          |
| NAME                                       |   |  | 3 2 NA          | ME                 |                    |                                |  |                               |                                |                              |                                  |          |
| STREET ADDRESS                             | •   |  | 3.3 \$1         | FREE T.A           | ADDRESS            |                                |  |                               |                                |                              |                                  |          |
| CITY-ST-ZIP                                |   |  | 3.4.00          | 1Y-SI-             | -216               |                                |  |                               |                                |                              |                                  |          |
| T:TLF                                      |   | DELETE                                 | 4 1 TI          |                    |                    |                                |  |                               |                                | Chang                        | e 🔲 Addition                     |          |
| NAME                                       |   |  | 4.2 NA          | MI.                |                    |                                |  |                               |                                |                              |                                  |          |
| STREET ADDRESS                             |   |  | 4.3 \$1         | REETA              | DORESS             |                                |  |                               |                                |                              |                                  |          |
| CITY ST-ZIP                                |   |  | 4.4 CI          | TY-\$1-            | - ZiF'             |                                |  |                               |                                |                              |                                  |          |
| TITLE                                      |   | DELETE                                 | 5 1 TI          |                    | -50   -            |                                |  |                               |                                | ] Chang                      | e                                |          |
| NAME                                       |   |  | 5.2 NA          | Mŧ                 |                    |                                |  |                               |                                |                              | -                                |          |
| STREET ADDRESS                             |   |  | 5351            | BEELA              | DORESS             |                                |  |                               |                                |                              |                                  |          |
| CITY-ST-ZIF                                |   |  |                 | TY - S1 -          |                    |                                |  |                               |                                |                              |                                  |          |
| THILE                                      |   | DELETE                                 | 6 1 Ti          |                    |                    |                                |  |                               |                                | Chang                        | e                                | $\neg$   |
| NAME                                       |   | _                                      | 6.2 NA          |                    |                    |                                |  |                               |                                |                              |                                  |          |
| STREET ADDRESS                             |   |  | P               |                    | DDRESS             |                                |  |                               |                                |                              |                                  |          |
| City-SI-ZiF                                |   |  | E               | ner - A.           | - 1                |                                |  |                               |                                |                              |                                  |          |
| reaction and action in the contraction and | certify that the information supplier   | d with this filing is voluntarily fun- |                 |                    |                    | ify for the exc                | reuntion stated in   | Section 119                   | 07/3/k) Flor                   | ida Sta                      | tutee I further                  | $\dashv$ |

and does not guart the information supplied with this limits is yournamy turnished and does not guarry for the exemption stated in Soction 119.07(3)(k). 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 of the corporation or fructive empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if or unged, or on an attachment with an address.

3 -28-96-467-731-244