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Mar 07 1997 8:00am
Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

1997

DOCUMENT # 712804 (4)
1. Corporation Name
VERO BEACH MUTUAL CONCERT ASSOCIATION, INC.

Principal Place of Business Mailing Address
P.O. BOX 4024 P.O. BOX 4024
VERO BEACH FL 32964-4024 VERO BEACH FL 32964



3. Date Incorporated or Qualified 05/24/1967 3a. Date of Last Report 01/25/1996
4. FEI Number 59-6190050 Applied For Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business 2a. Mailing Address
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.
22 City & State 27 City & State
23 Zip Country 28 Zip Country
24 25 29 30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

VAN DERVEER, ALBERT C
1012 MANGROVE LANE
VERO BEACH FL 32963

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

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: typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	SECRETARY SD
NAME	ALLEN, BRENDA	1.2 NAME	ALLEN BRENDA
STREET ADDRESS	4683 PEBBLE BAY CIRCLE	1.3 STREET ADDRESS	4683 PEBBLE BAY CIRCLE
CITY-ST-ZIP	VERO BEACH FL	1.4 CITY-ST-ZIP	VERO BEACH FL 32963
TITLE	SD	2.1 TITLE	
NAME	WITTEN, CORA	2.2 NAME	← REMAINS A DIRECTOR
STREET ADDRESS	1995 WINDWARD WAY	2.3 STREET ADDRESS	
CITY-ST-ZIP	VERO BEACH FL	2.4 CITY-ST-ZIP	
TITLE	TD	3.1 TITLE	
NAME	VAN DERVEER, ALBERT	3.2 NAME	← SAME
STREET ADDRESS	1012 MANGROVE LANE	3.3 STREET ADDRESS	
CITY-ST-ZIP	VERO BEACH FL	3.4 CITY-ST-ZIP	
TITLE	VD	4.1 TITLE	
NAME	MANK, PHILIP	4.2 NAME	← SAME
STREET ADDRESS	6300 8TH STREET	4.3 STREET ADDRESS	
CITY-ST-ZIP	VERO BEACH FL	4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	PRESIDENT PD
NAME		5.2 NAME	PHILIP W. YOUNG
STREET ADDRESS		5.3 STREET ADDRESS	3655 FLAMINGO DRIVE
CITY-ST-ZIP		5.4 CITY-ST-ZIP	VERO BEACH FL 32963
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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 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: ALBERT C. VAN DERVEER
1/20/96 561-234-8440

CR2E037 (9/96)