

FILE NOW: FILING FEE IS \$61.25

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Feb 18 1998 8:00am
Secretary of State

NONPROFIT CORPORATION - ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Moynihan Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 712804 (4)
1. Corporation Name
VERO BEACH MUTUAL CONCERT ASSOCIATION, INC.



Principal Place of Business P.O. BOX 4024 VERO BEACH FL 32964-4024		Mailing Address P.O. BOX 4024 VERO BEACH FL 32964-4024		3. Date Incorporated or Qualified 05/24/1967	
2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country		4. FEI Number 59-6190050 Applied For Not Applicable	
9. Name and Address of Current Registered Agent VAN DERVEER, ALBERT C 1012 MANGROVE LANE VERO BEACH FL 32963		10. Name and Address of New Registered Agent 81 Name CORA WITTEN 82 Street Address (P.O. Box Number is Not Acceptable) 1995 WINDWARD WAY 83 84 City VERO BEACH FL 85 Zip Code 32963			

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 CORA WITTEN, PRESIDENT
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)
Cora Witten, president 1-18-98
DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD ALLEN, BRENDA 4883 PEBBLE BAY CIRCLE VERO BEACH FL <input type="checkbox"/> DELETE	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	SD ALLEN, BRENDA 411 PEPPER TREE DR. NORTH VERO BEACH FL 32963 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WITTEN CORA 1995 WINDWARD WAY VERO BEACH FL <input type="checkbox"/> DELETE	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	WITTEN, CORA 1995 WINDWARD WAY VERO BEACH FL 32963 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D VAN DERVEER, ALBERT 1012 MANGROVE LANE VERO BEACH FL <input checked="" type="checkbox"/> DELETE	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	DEVITT, FRANKINE 1155 BOWLINE DR VERO BEACH, FL 32963 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MANK, PHILIP 6300 8TH STREET VERO BEACH FL <input type="checkbox"/> DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD PHILIP W YOUNG 3655 FLAMINGO DR VERO BCH FL <input checked="" type="checkbox"/> DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	YOUNG, PHILLIP W 3655 FLAMINGO DR VERO BEACH, FL <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	D. STEFFENS, GAEL 915 TROPIC DR. VERO BEACH, FL 32963 <input type="checkbox"/> Change <input type="checkbox"/> Addition

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: Frankine Devitt 1-18-98
Signature and typed or printed name of signing officer or director
Date
Daytime Phone # 0080931

CR2E037 (10/97)