

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Apr 19, 1999 8:00 am
Secretary of State

04-19-1999 90087 022 ****61.25

0021049

DOCUMENT # 713287

1. Corporation Name

REALTORS ASSOCIATION OF INDIAN RIVER COUNTY, INC

Principal Place of Business

2182 PONCE DE LEON
VERO BEACH FL 32960

Mailing Address

2182 PONCE DE LEON
VERO BEACH FL 32960



2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip

Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

3. Date Incorporated or Qualified

08/31/1967

4. FEI Number

59-1877401

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

9. Name and Address of Current Registered Agent

COLLINS, GEORGE G JR
756 BEACHLAND BLVD
VERO BEACH FL 32960

10. Name and Address of New Registered Agent

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

OFFICERS AND DIRECTORS

12. ☒ DELETE

TITLE VP
NAME MACWILLIAM, ALEX I
STREET ADDRESS 2909 OCEAN DRIVE
CITY-ST-ZIP VERO BEACH FL

TITLE P ☐ DELETE

NAME WIELER, ERIC
STREET ADDRESS 321 21ST STREET
CITY-ST-ZIP VERO BCH, FL 00000

TITLE P ☐ DELETE

NAME KLENSTIVER, WAYNE
STREET ADDRESS P.O. BOX 6535 N/A
CITY-ST-ZIP VERO BEACH, FL 00000 32961

TITLE D ☒ DELETE

NAME CAYLL, ROBERT
STREET ADDRESS 2855 OCEAN DRIVE, STE. C-1
CITY-ST-ZIP VERO BEACH FL

TITLE D ☐ DELETE

NAME RICHARDS, NANCY
STREET ADDRESS 118 43RD AVE
CITY-ST-ZIP VERO BCH, FL 32968

TITLE ST ☒ DELETE

NAME LOWE, ROBERT
STREET ADDRESS 4949 N A1A #131
CITY-ST-ZIP FT PIERCE FL 34949

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE President Elect ☐ Change ☒ Addition

1.2 NAME Rodney C. Paradise
1.3 STREET ADDRESS 2855 Ocean Drive
1.4 CITY-ST-ZIP Vero Beach, FL 32963

2.1 TITLE Director ☒ Change ☐ Addition

2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE Director ☐ Change ☒ Addition

4.2 NAME maria L. Saunders
4.3 STREET ADDRESS 855 21st Street, Suite 1
4.4 CITY-ST-ZIP Vero Beach, FL 32961

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE Director ☐ Change ☒ Addition

6.2 NAME David Silverman
6.3 STREET ADDRESS 1511 US Highway 1
6.4 CITY-ST-ZIP Sebastian, FL 32958

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, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/7/99

Date

561-567-3570

Daytime Phone #

CR2E037 (11/98)