

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 27, 2002 8:00 am
Secretary of State

02-27-2002 90050 033 ****61.25

DOCUMENT # 713287

1. Entity 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**

80034968



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **59-1877401**

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

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

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$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 **PPD** ☒ Delete
NAME **PARADISE, RODNEY C**
STREET ADDRESS **2855 OCEAN DRIVE**
CITY-ST-ZIP **VERO BEACH FL 32963**

TITLE **P. Elect** ☐ Change ☒ Addition
NAME **Kenneth A. Landers, Jr.**
STREET ADDRESS **2027 Indian River Blvd.**
CITY-ST-ZIP **Vero Beach, FL 32960**

TITLE **PD** ☒ Delete
NAME **PIROZZOLI, JOSEPHINE**
STREET ADDRESS **938 US HIGHWAY 1**
CITY-ST-ZIP **SEBASTIAN FL 32958**

TITLE **V** ☐ Change ☒ Addition
NAME **Ron Rennick, Jr.**
STREET ADDRESS **15 Royal Palm Blvd.**
CITY-ST-ZIP **Vero Beach, FL 32960**

TITLE **PED** ☐ Delete
NAME **NORK, LOIS K**
STREET ADDRESS **2901 OCEAN DR.**
CITY-ST-ZIP **VERO BEACH FL 32964**

TITLE **P** ☒ Change ☐ Addition
NAME **Work, Lois K.**
STREET ADDRESS **2901 Ocean Drive**
CITY-ST-ZIP **Vero Beach, FL 32964**

TITLE **STD** ☒ Delete
NAME **SAUNDERS, MARIA L**
STREET ADDRESS **855 21ST STREET, SUITE 1**
CITY-ST-ZIP **VERO BEACH FL 32961**

TITLE **S/T** ☐ Change ☒ Addition
NAME **Karen Hall**
STREET ADDRESS **947 20th Place**
CITY-ST-ZIP **Vero Beach, FL 32960**

TITLE **VPD** ☒ Delete
NAME **RICHARDS, NANCY**
STREET ADDRESS **118 43RD AVE**
CITY-ST-ZIP **VERO BCH. FL 32968**

TITLE **D** ☐ Change ☒ Addition
NAME **Donald Frederick**
STREET ADDRESS **3206 Cardinal Drive**
CITY-ST-ZIP **Vero Beach, FL 32963**

TITLE **D** ☒ Delete
NAME **DONNER, EDWARD**
STREET ADDRESS **2800 OCEAN DR., SUITE E**
CITY-ST-ZIP **VERO BEACH FL 32964**

TITLE **D** ☐ Change ☒ Addition
NAME **Chester R. Hogan, II**
STREET ADDRESS **947 20th Place**
CITY-ST-ZIP **Vero Beach, FL 32960**

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:

SIGNATURE REQUIRED

Lois K. Wach 2/12/02

Date

Daytime Phone #

CR2E037 (9/01)