

**FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00**

**CORPORATION  
ANNUAL REPORT  
1995**



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

**APPROVED  
AND  
FILED**

95 APR 24 AM 8:47

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**DOCUMENT # 720531 (3)**

1. Corporation Name

**OCEAN TOWERS OF VERO BEACH, INC.**

Principal Place of Business Mailing Address  
**WELLIOTT-MERRILL COMMUNITY MANAGEMENT  
1105 12TH ST.  
VERO BEACH FL 32960**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified **03/17/1971** 3a. Date of Last Report **08/12/1994**  
4. FEI Number **59-1490027** Applied For  
Not Applicable

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

5. Certificate of Status Desired  **\$8.75 Additional Fee Required**  
6. Election Campaign Financing Trust Fund Contribution  **\$5.00 May Be Added to Fees**  
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status  **\$68.75 Supplemental Fee Not Required**  
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes  Yes  No

9. Name and Address of Current Registered Agent  
**ELLIOTT, RICHARD D  
1105 12TH ST.  
VERO BEACH FL 32960**

10. Name and Address of New Registered Agent  
61 Name **Richard D. Elliott**  
62 Street Address (F.O. Box Number is Not Acceptable) **Elliott-Merrill Community Management**  
63 **1105 12<sup>th</sup> St.**  
64 City **Vero Beach** FL 65 Zip Code **32960**

11. Pursuant to the provisions of Sections 607.0502 and 607.1608, 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 607.0505, Florida Statutes.

SIGNATURE *Richard D. Elliott* **Richard D. Elliott** **3/27/95**  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when nonrelating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>PD MCCULLOUGH, PRISCILLA 2735 OCEAN DR. VERO BCH. FL 32964</b>	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>V WHITE, PHILIP P.O. BOX 4107 N/A VERO BCH. FL 32964</b>	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>S COOK, ANN 2713 OCEAN DR. VERO BCH. FL 32963</b>	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>T MUNSON, BOB 2717 OCEAN DR. VERO BCH. FL 32963</b>	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <b>TD Fred cook 2713 Ocean Dr. Vero Beach, FL 32963</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D STOKES, EDNA 2741 OCEAN DR. #34 VERO BCH. FL 32963</b>	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <b>D Muriel Small 2733 Ocean Drive Vero Beach, FL 32963</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D ADAMS, MICHAEL 510 DATE PALM RD VERO BEACH FL</b>	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <b>Delete</b>

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(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 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 as an attachment with an address.

SIGNATURE: *Priscilla B. McCullough* **Priscilla B. McCullough** **3/27/95 407-231-3098**  
Signature AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DATE (Minimum 1 Year)