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Jun 02 1997 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997



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

DOCUMENT # 728736 (0)  
1. Corporation Name  
INDIAN RIVER SHORES RESIDENT'S ASSOCIATION, INC.



Principal Place of Business Mailing Address  
P. O. BOX 8294 VERO BCH. FL 32963 P. O. BOX 8284 VERO BCH. FL 32963-8284

3. Date Incorporated or Qualified 02/06/1974  
3a. Date of Last Report 06/14/1996

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

4. FEI Number 23-7400546 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

9. Name and Address of Current Registered Agent  
OLIVER, WILLIAM  
5601 HWY A1A, #1105  
VERO BEACH FL 32963

10. Name and Address of New Registered Agent  
81 Name Brad Lamson  
82 Street Address (P.O. Box Number is Not Acceptable) 5400 N. A1A, #G31  
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 *Brad Lamson* DATE 4/14/97  
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		
TITLE	PD	<input type="checkbox"/> DELETE
NAME	OLIVER, WILLIAM	
STREET ADDRESS	5601 HWY A1A 1105	
CITY-ST-ZIP	VERO BCH. FL	
TITLE	VD	<input type="checkbox"/> DELETE
NAME	MACPHERSON, ROBERT	
STREET ADDRESS	210 PARK SHORES CIRCLE	
CITY-ST-ZIP	VERO BCH. FL	
TITLE	VD	<input type="checkbox"/> DELETE
NAME	LAMSON, BRAD	
STREET ADDRESS	5400 N A1A G31	
CITY-ST-ZIP	VERO BCH. FL	
TITLE	ST	<input type="checkbox"/> DELETE
NAME	WALKER, HARRY	
STREET ADDRESS	8317 CHINABERRY LN.	
CITY-ST-ZIP	VERO BCH. FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
1.1 TITLE	Lamson, Brad, Pres.	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME		
1.3 STREET ADDRESS	5400 N. A1A, G31	
1.4 CITY-ST-ZIP	VERO BEACH, FL 32963	
2.1 TITLE	1st V.P.	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	O. Connor, Penelope	
2.3 STREET ADDRESS	131 Shores Dr.	
2.4 CITY-ST-ZIP	VERO BEACH, FL 32963	
3.1 TITLE	2nd V.P.	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	Mitchell, John	
3.3 STREET ADDRESS	220 Sandpiper Point	
3.4 CITY-ST-ZIP	VERO BEACH FL 32963	
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
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.

CR2E037 (9/96)

*Handwritten signature and date: 6/2/97*

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