

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 20, 1999 8:00 am  
Secretary of State

04-20-1999 90241 032 \*\*\*\*61.25

DOCUMENT # 755437

1. Corporation Name

VERO BEACH QUARTERBACK CLUB, INC.

Principal Place of Business

P.O. BOX 2932  
VERO BEACH FL 32961

Mailing Address

P.O. BOX 2932  
VERO BEACH FL 32961

386413 - 90241 - 32



2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

3. Date Incorporated or Qualified

12/09/1980

4. FEI Number

59-2475299

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

FINNERTY, T.J.  
2345 89TH AVE  
VERO BEACH FL 32966

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

12.

OFFICERS AND DIRECTORS

TITLE PD  
NAME KOEHLER, KIRK  
STREET ADDRESS 5701 GLEN EAGLE DR.  
CITY-ST-ZIP VERO BEACH FL

TITLE D  
NAME CAPECE, PETER  
STREET ADDRESS 405 11TH COURT  
CITY-ST-ZIP VERO BEACH FL

TITLE VD  
NAME WONDERLY, GEORGE  
STREET ADDRESS 475 SE 12TH PLACE  
CITY-ST-ZIP VERO BEACH FL

TITLE D  
NAME OESS, JOSEPH M  
STREET ADDRESS 631 CYPRESS ROAD  
CITY-ST-ZIP VERO BEACH FL 32963

TITLE TD  
NAME FINNERTY, T.J.  
STREET ADDRESS 2345 89TH AVE.  
CITY-ST-ZIP VERO BEACH FL

TITLE  
NAME MILLS, WM  
STREET ADDRESS 760 8TH CT SUITE 5  
CITY-ST-ZIP VERO BEACH FL 32962

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

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

Date

Daytime Phone #

CR2E037-(11/98)