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Jun 11 1997 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT <b>1997</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **759426** (0)

1. Corporation Name

**THE RIVERSIDE THEATRE ENDOWMENT FUND, INC. IN MEMORY OF C. CARROLL OTTO**

Principal Place of Business

Mailing Address

**3250 RIVERSIDE PARK DR.  
P O BOX 3788  
VERO BEACH FL 32964**

**3250 RIVERSIDE PARK DR.  
P O BOX 3788  
VERO BEACH FL 32963-1877**



3. Date Incorporated or Qualified **08/03/1981** 3a. Date of Last Report **09/26/1996**

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

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25

29

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9. Name and Address of Current Registered Agent

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

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **VD** ☐ DELETE  
NAME **HALL, LYNN**  
STREET ADDRESS **645 BEACHLAND BLVD 7**  
CITY-ST-ZIP **VERO BEACH FL**

1.1 TITLE **President** ☒ Change ☐ Addition  
1.2 NAME **Lynn Hall**  
1.3 STREET ADDRESS **645 Beachland Blvd.**  
1.4 CITY-ST-ZIP **Vero Beach, FL 32963**

TITLE **PD** ☐ DELETE  
NAME **BRAND, ROBERT C**  
STREET ADDRESS **40 LIVE OAK RD**  
CITY-ST-ZIP **VERO BEACH FL**

2.1 TITLE **Vice President** ☒ Change ☐ Addition  
2.2 NAME **William J. Gordon**  
2.3 STREET ADDRESS **725 Live Oak Lane**  
2.4 CITY-ST-ZIP **Vero Beach, FL 32963**

TITLE **SD** ☐ DELETE  
NAME **BLOCK, JACELYN**  
STREET ADDRESS **4925 4TH ST**  
CITY-ST-ZIP **VERO BEACH FL**

3.1 TITLE **Secretary** ☒ Change ☐ Addition  
3.2 NAME **Cheryl O'Keeffe**  
3.3 STREET ADDRESS **515 River Drive**  
3.4 CITY-ST-ZIP **Vero Beach, FL 32963**

TITLE **TD** ☐ DELETE  
NAME **WARD, MCIAHEL**  
STREET ADDRESS **3055 CARDINAL DR**  
CITY-ST-ZIP **VERO BEACH FL**

4.1 TITLE **Treasurer** ☒ Change ☐ Addition  
4.2 NAME **Dan Gaines**  
4.3 STREET ADDRESS **641 Azalea Lane, Apt. D**  
4.4 CITY-ST-ZIP **Vero Beach, FL 32963**

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

6.1 TITLE  
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)