## FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #
1. Corporation Name

(9)

## INDIAN RIVER CITRUS LEAGUE INC.

HADIAN THACH OLLIOS ECAGE, INC.												
Principal Place of Business		Mailing Address	Mailing Address				* 124115 14414 18111 59141 11211 441		*** *****	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
7925 20TH STREET VERO BCH FL 32966		Indian River Citrus League Inc Po Box 519 Vero Bch Fl 32961-0519										
		US	3				ate Incorporated or Qualified 03/01/1931	3a. D	ate of Last P 01/24/19	Teport 196		
Principal Place of Business 21		2a. Mailing Address 26					4. FEI Number 59-0594030			Applied For Not Applicable		
Suite, Apt. #, etc.		Suite, Apt. #, etc.	27			<b>5</b> . Ce	ertificate of Status Desired		\$8.75 Additional Fee Required			
City & State 23		City & State			· · · · · · · · · · · · · · · · · · ·	l l	ection Campaign Financing ust Fund Contribution			May Be to Fees		
Zip <b>24</b>	Country 25	Zıp <b>29</b>	30 Co	untry		Flo	is corporation has liability forida Statutes	Yes (	□ No	3. 199.032,		
	9. Name and Address of Curre	nt Registered Agent				10. Na	ame and Address of New	Registered	Agent		4	
				81	Name							
	Que, douglas C. Th street			82	Street A	Address (P.O.	Box Number is Not Accep	table)				
vero b	EACH FL 32960	•		83							1	
				84	City			FL	<b>85</b> Zip	Code	1	
11. Pursuant office or r agent. I a	to the provisions of Sections 617.05 egistered agent, or both, in the Statm familiar with, and accept the oblig Douglas C. Bourn Signature, lyped or printed name of registered ag	actions of, Section 617.0503, I <b>ique</b>	Ow	tutes.	е.	Bun	Mars	e purpose of cept the app	f changing in country as	its registered registered		
12.		ND DIRECTORS	13.	y ngon	i signatore ii	required when rein	DITIONS/CHANGES TO OF	FICERS AN	D DIRECTO	RS IN 12	†დ	
TITLE	VCD	DELETE	1.1 T	ITLE		, , , ,			Change	Addition	96/6	
NAME	HAMNER, GEORGE F		128	IAME					•	_		
STREET ADDRESS 995 SANDFLY LANE			1.3 STREET ADDR		ODRESS						5	
CITY-ST-ZIP	ACON DEVOLUE			HTY-ST	1						R2F037	
TITLE	PD	☐ DELETE	2.1 T			····			☐ Change	Addition		
NAME	LUTHER, JOHN M		2.2 N	IAME	1							
STREET ADDIRESS	555 A1A		2.3 9	TREET A	ODRESS							
CHY-ST-ZIP	VERO BEACH FL		2.4	CITY - ST	r-ZIP						1	
TITLE	CD	DELETE	3.1 7					H	☐ Change	Addition	7	
NAME	RICHEY, DANIEL R.		3.2 4	IAME								
STREET ADDRESS	2625 63RD ST.		3,3 9	TREET A	NDORESS							
CITY-ST-ZIP	WINTER BEACH FL		3.4.	CITY-S1	r-ZIP							
TITLE	VD	DELETE	4.11	ITLE					Change	Addition		
NAME	PARRISH, J J III		4.2	NAME							1	
STREET ADDRESS	603 INDIAN RVR AVE		4.3 \$	TREET A	ADORESS						1	
CITY - \$1 - ZIP	VERO BCH FL		4,4 (	CITY-ST	- 2IP						J	
TITLE	VD	<b>★</b> DELETE	5.1 7	ITLE		VD			Change	X Addition		
NAME	SEXTON, ROBERT G		5.21	IAME	-1	Philip '	C. Gates, Sr.					
STREET ADDRESS	1815 28TH AVE.		5.3 9	TREET A			outh Indian Riv	er Dri	ve			
CITY-ST-ZIP	VERO BEACH FL		5.40	CITY-ST			erce FL 3495					
TITLE	VO	DELETE		ITLE				··-··	☐ Change	Addition	1	
NAME	JACOBS, DARYL C		6.21	IAME								
STREET ADDRESS	5235 22ND ST.		6.3 5	TREET A	NDORESS							
CITY-ST-ZIP	VERO BEACH FL		6.4 0	HY-ST	- ZIP							

SIGNATURE:

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 is 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 preceiver 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 chapted or of an attachment with an address.

Daniel R. Richey 3/4/97

561/562-2728

**FILED** 

Mar 07 1997 8:00am

Secretary of State