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**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 **DOCUMENT # F06922** 

(1)

FILED	
May 19 1997 8:00an	n
Secretary of State	

1. Corporation Name SILVER SANDS OF INDIAN RIVER, INC.  Principal Place of Business  3033 RIVIERA DR STE 201 NAPLES FL-33940- NAPLES FL 34103-2750								
US		US		3. Date Incorporated or Qualified 11/25/1980	<b>3a.</b> Date of Last Report <b>04/12/1996</b>			
2. Principal F	lace of Business	2a. Mailing Address	, <del>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</del>	<del></del>	4. FEI Number		<del></del>	oplied For
<u> </u>		26		· · · · · · · · · · · · · · · · · · ·	59-2153144	<u>.</u>		ot Applicable
Suite, Apt	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired			Additionaf equired
City & Stat	е	City & State			Election Campaign Financing     Trust Fund Contribution	П		May Be to Fees
Zip	Country	Zip	Country	,	This corporation has liability for it		<del></del>	
3410	3 25	29	30				No	
	9. Name and Address of Current	Registered Agent			10. Name and Address of New Re	gistered A	gent	
	D, DAVID G.		81	Name				
	3 RIVIERA DR.		82	Street Add	dress (P.O. Box Number is Not Acceptab	ole)		
STE			83	ļ				
NAP	LES FL 33 <del>040</del>		63					
			84	City		FL	85 Zip	Code
11 Purcuant	to the provisions of Sections 607 0502	and 607 1508 Florida Statute	e the show	e-named corr	noration submits this statement for the n		changing i	103
	to the provisions of bootions cor book	DING CON, 1000, 1 to 100 Cuton	oo, one abore			our pood or	Cultural Surial I	registered
office or i	registered agent, or both, in the State of	of Florida, Such change was a	authorized by	y the corpora	ation's board of directors. I hereby accep	pt the appo	oiniment as	regisiered
	registered agent, or both, in the State of am familiar with, and accept the obliga	of Florida. Such change was a tions of Section 607.0505, Flo	authorized by orida Statutes	y the corpora s.	poration submits this statement for the p ation's board of directors. I hereby accep	pt the appo	ointment as	regisiereu
	registered agent, or both, in the State of an familiar with, and accept the obligation of the state of the st				ation's board of directors. I hereby acceptions to the second of directors and the second of the sec	pt the appo	ointment as	
SIGNATURE		it and this if applicable (NOTE				DATE		
GNATURE	Stgrature, typind or proted name of registered agor OFFICERS AND	it and this if applicable (NOTE	E: Registered Age		ired when reinslating)	DATE		
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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 eath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SILVER SANDS OF INDIAN RIVER

GNATURE:

3/26/97

Dayline Phone #

SIGNATURE: