FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F39990

INDIAN RIVER LANDS, INC.

							(18 171)]		
Principal Place of Business Mailing Address							Till Obit Albit 3	ilui bibil uidii i	HUTT BIBN 1001
SUITE C SUITE C		3003 CARDINAL DR SUITE C VERO BEACH FL 32963-1974	3			DO NOT WRI	ITE IN THIS	SPACE.	
VERO BEACH FL 32963-1974 VERO BEACH FL 32963-1974			,		ŀ	3. Date Incorporated or Qualifed		OI AOL	
	•					06/09/1981	•	•	
Principal Place of Business 2a. Mailing Address						4. FEI Number		Ap	plied For
21 26		26				59-2815031		No	t Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.	¬ '''			5. Certifcate of Status Desired		\$8.75 A	
City & State		City & State				-	Fee Re		
23		28			6. Election Campaign Financing Trust Fund Contribution	ĠŹ.	\$5.00 Added t	- 1	
	Zip Country Zip		Country		-	8. This corporation owes the curr	rent year Int		o rees
24	25 29 30)]		1	Personal Property Tax.	ent year into		□No
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			Agent		
			81	Name					
OFFUTT, HARRY C, III 3003 CARDINAL DRIVE			82	Street A	Address (P.O. Box Number is Not Acceptable)				
VERO BEACH FL 32960			83					1	
	SANTAGE ASSESSMENT		84	City		The second secon	* 1 * 7 * 6	85 Zip C	ode.
and the second of the second o			04	City			FL	. 65 210 0	,oue
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its register 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 607.0505, Florida Statutes.								registered gistered	
SIGNATURE					<u> </u>				
Signature, typed or printed name of registered agent and title if applicable. (NOTE: F 12. OFFICERS AND DIRECTORS			nt signature re	equired wh	en reinstating)	DATE CONTRACT	D DIDEOTO	DO 101 40	
TITLE	PD OFFICERS AND	DELETE	13.	···		ADDITIONS/CHANGES TO OF	FICERS AN	☐ Change	Addition
NAME	COCHRANE, WILLIAM H.	C) BELETIC	1.2 NAME			er results			L] Nadilloni
STREET ADDRESS			1.3 STREET	ADDDESS				•	
CITY-ST-ZIP	VERO BEACH, FL 00000		1.4 CITY-S				•	:	
TITLE	VPD	☐ DELETE	2.1 TITLE					Change	Addition
NAME	MCLARTY, NANCY J.		2.2 NAME	1					
STREET ADDRESS			2.3 STREE	ADORESS					ſ
CITY-ST-ZIP	VERO BEACH FL		2. 4 CITY-S	T-ZIP					
TITLE	STD	☐ DELETE	3.1 TITLE					☐ Change	☐ Addition
NAME	OFFUTT, HARRY C. III		3.2 NAME	J					ļ
STREET ADDRESS	0000 0,		3.3 STREET	ADDRESS			· //	4,7, 8 M	
CITY-ST-ZIP	VERO BEACH FL		3.4. CITY-S	T-ZIP			<u> </u>	<u> </u>	<u> </u>
TITLE	D	☐ DELÉTÉ	4.1 TITLE			,		☐ Change	🗀 Addition
NAME	GONZALEZ, LENOR L.	÷ (+	4. 2 NAME]
STREET ADDRESS		- *	4.3 STREET						
TITLE	VERO BEACH FL D	DELETE	4.4 CITY-S' 5.1 TITLE	1-ZIP	.			Change	Addition
NAME	WALTON, WILLIAM H. III	_ b	5.1 IIILE 5.2 NAME						, <u></u>
STREET ADDRESS	/		5.3 STREET	ADDRESS					
CITY-ST-ZIP NEW YORK, NY.			5.4 CITY-S	CITY-ST-ZIP					

CITY-ST-ZIP VERO BEACH FL 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed of the an attachment with as address, with all other like empowered.

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

SMATHERS, ROSEMARY T.

500 BEACH ROAD - #311

TITLE

NAME

STREET ADDRESS

DELETE

FILED

Jan 29, 1999 8:00am

Secretary of State

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01-29-1999 90062 044 ***150.00

Addition

☐ Change