

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

FILED  
May 12 1997 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **L23440** (5)  
1. Corporation Name  
**INDIAN RIVER CONSTRUCTION AND DEVELOPMENT, INC.**



Principal Place of Business <b>9300 N A1A S201-C VERO BEACH FL 32963 US</b>	Mailing Address <b>9300 N A1A S201-C VERO BEACH FL 32963-4567 US</b>
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2. Principal Place of Business <b>21 5055 N A1A</b> Suite, Apt. #, etc. <b>22 Suite B</b> City & State <b>23 Vero Beach, FL</b> Zip <b>24</b> Country <b>25</b>	2a. Mailing Address <b>26 5055 N A1A</b> Suite, Apt. #, etc. <b>27 Suite B</b> City & State <b>28 Vero Beach, FL</b> Zip <b>29 32963-1206</b> Country <b>30</b>
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3. Date Incorporated or Qualified <b>10/17/1989</b>	3a. Date of Last Report <b>05/01/1996</b>
4. FEI Number <b>65-0217985</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00</b> May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent <b>THOMPSON, DAVID C. 9415 PERIWINKLE DRIVE VERO BEACH 32980</b>	
81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	<b>FL</b>
	85 Zip Code

10. Name and Address of New Registered Agent	
81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	<b>FL</b>
	85 Zip Code

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 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 607.0505, 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	<b>PSTD</b>	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>THOMPSON, DAVID C.</b>	1.2 NAME	
STREET ADDRESS	<b>9415 PERIWINKLE DR</b>	1.3 STREET ADDRESS	
CITY-ST-ZIP	<b>VERO BEACH FL</b>	1.4 CITY-ST-ZIP	
TITLE	<b>VD</b>	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>ADAMS, LANCE K</b>	2.2 NAME	
STREET ADDRESS	<b>120 PEPPERTREE DRIVE</b>	2.3 STREET ADDRESS	
CITY-ST-ZIP	<b>VERO BEACH FL</b>	2.4 CITY-ST-ZIP	
TITLE		3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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 607, Florida Statutes; and that my name appears in Block 12 or Block 13, if changed, or on an attachment with an address.

SIGNATURE:

*David C. Thompson*

04/21/97 (561) 234 2800

CR2E034 (9/96)