


FILED
Mar 02, 1999 8:00 am
Secretary of State

03-02-1999 90057 002 ***450.00

PROFIT CORPORATION ANNUAL REPORT 1999				FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # M96183 1. Corporation Name ARCHER OF VERO BEACH, INC.					
Principal Place of Business % ROBERT G. MOONEY, JR. 1396 U.S. HIGHWAY ONE VERO BEACH FL 32960			Mailing Address % ROBERT G. MOONEY, JR. 1396 U.S. HIGHWAY ONE VERO BEACH FL 32960		
DO NOT WRITE IN THIS SPACE					
3. Date Incorporated or Qualified 08/29/1988					
2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip Country 24				2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip Country 29	
4. FEI Number 59-2907509				Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>				\$5.00 May Be Added to Fees	
8. This corporation owes the current year Intangible Personal Property Tax. <input type="checkbox"/> Yes <input type="checkbox"/> No					
9. Name and Address of Current Registered Agent MOONEY, ROBERT G., JR. 1396 U.S. HIGHWAY ONE VERO BEACH FL 32960			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 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
12. OFFICERS AND DIRECTORS					
TITLE	PD	<input type="checkbox"/> DELETE	1.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	MOONEY, ROBERT G., JR.		1.2 NAME		
STREET ADDRESS	1396 U.S. HIGHWAY ONE		1.3 STREET ADDRESS		
CITY-ST-ZIP	VERO BEACH FL		1.4 CITY-ST-ZIP		
TITLE	SD	<input type="checkbox"/> DELETE	2.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	HERZOG, SANDRA MOONEY		2.2 NAME		
STREET ADDRESS	1396 U.S. HIGHWAY ONE		2.3 STREET ADDRESS		
CITY-ST-ZIP	VERO BEACH FL		2.4 CITY-ST-ZIP		
TITLE	VPT	<input type="checkbox"/> DELETE	3.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	WILLIAMS, MARGARET L		3.2 NAME		
STREET ADDRESS	1396 US 1		3.3 STREET ADDRESS		
CITY-ST-ZIP	VERO BEACH FL		3.4 CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE	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		<input type="checkbox"/> DELETE	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		<input type="checkbox"/> DELETE	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 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, with all other like empowered.

SIGNATURE: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-5-99

Date

Daytime Phone #

CR2E034 (11/98)