

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N13487 (6)

1. Corporation Name

INDIAN RIVER COLONY CLUB, INCORPORATED



Principal Place of Business

Mailing Address

6205 MURRELL RD
MELBOURNE FL 32940

6205 MURRELL RD
MELBOURNE FL 32940

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

HENNIG, GEORGE
6205 MURRELL RD
MELBOURNE FL 32940

81 Name Cynthia A. Waybright

82 Street Address (P.O. Box Number is Not Acceptable)
6205 Murrell Road

83

84 City Melbourne

FL

85 Zip Code 32940

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE

Cynthia A. Waybright

Cynthia A. Waybright

3/4/96

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	PC	☒ DELETE
NAME	MASTERTSON, GORDON P	
STREET ADDRESS	607 RIVERSIDE DRIVE	
CITY-ST-ZIP	MELBOURNE FL	
TITLE	D	☒ DELETE
NAME	HENNIG, GEORGE	
STREET ADDRESS	1469 PATRIOT DR.	
CITY-ST-ZIP	MELBOURNE FL	
TITLE	ST	☒ DELETE
NAME	MCAHON, WILLIAM	
STREET ADDRESS	1415 KITTY HAWK WAY	
CITY-ST-ZIP	MELBOURNE FL	
TITLE	D	☒ DELETE
NAME	ROSE, BOONE JR.	
STREET ADDRESS	1663 FRONTIER DRIVE	
CITY-ST-ZIP	MELBOURNE FL	
TITLE	D	☒ DELETE
NAME	MAHER, JOHN	
STREET ADDRESS	1609 PIONEER DRIVE	
CITY-ST-ZIP	MELBOURNE FL	
TITLE	D	☐ DELETE
NAME	FRANK, KEITH	
STREET ADDRESS	1348 PILGRAM DR.	
CITY-ST-ZIP	MELBOURNE FL	

1.1 TITLE	P	☒ Change ☐ Addition
1.2 NAME	James E. Ferguson	
1.3 STREET ADDRESS	1469 Patriot Dr.	
1.4 CITY-ST-ZIP	Melbourne, FL 32940	
2.1 TITLE	ST	☒ Change ☐ Addition
2.2 NAME	Cynthia A. Waybright	
2.3 STREET ADDRESS	473 Santa Maria	
2.4 CITY-ST-ZIP	Palm Bay, FL 32908	
3.1 TITLE	C	☒ Change ☐ Addition
3.2 NAME	Henry C. Newell	
3.3 STREET ADDRESS	975 Mayflower Avenue	
3.4 CITY-ST-ZIP	Melbourne, FL 32940	
4.1 TITLE	D	☐ Change ☒ Addition
4.2 NAME	William Aman, Jr.	
4.3 STREET ADDRESS	1341 Independence Ave.	
4.4 CITY-ST-ZIP	Melbourne, FL 32940	
5.1 TITLE	D	☐ Change ☒ Addition
5.2 NAME	John Kjellstrom	
5.3 STREET ADDRESS	1622 Independence Avenue	
5.4 CITY-ST-ZIP	Melbourne, FL 32940	
6.1 TITLE	D	☐ Change ☒ Addition
6.2 NAME	Richard B. Evans	
6.3 STREET ADDRESS	1462 Patriot Drive	
6.4 CITY-ST-ZIP	Melbourne, FL 32940	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Cynthia A. Waybright

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

3/4/96

(407) 255-6006

CR2E037 (12/95)

D

Ellis Stackfleth

1419 Yorktown Court

Melbourne, FL 32940