## **FILE NOW: FILING FEE IS \$61.25**

**NONPROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 DOCUMENT # 1. Corporation Name

(8)

## INDIAN RIVER HEALTH SERVICES CORPORATION

					(	41 <b></b>	
Principal Place of Business Mailing Address					T HANGEL MAN MENNEN MENNEN THE FRENCH MAINTEN WAS REALLY BEI	isi midit High Gibbi alah	Alail Bills (Bat
C/O MICHAEL	J. O'GRADY, JR.	C/O MICHAEL J. O'GRADY	. JR.				
1000 36TH STR		1000 36TH STREET		1			
VERO BEACH F	FL 32960-4862	VERO BEACH FL 32980-48	95		3. Date Incorporated or Qualified	3a. Date of Last	Report
					04/29/1986	02/14/1	
2. Principal P	Place of Business	2a. Mailing Address			4. FEI Number	1 7	Applied For
21		26			65-0029298		Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	1 4	Additional
22		27			OF COMMOND OF CRACO DOGING	Fee	Required
City & Stat	e	City & State			6. Election Campaign Financing		O May Be
23		28]			Trust Fund Contribution		d to Fees
Zip	Country	Zip	Country	•	8. This corporation has liability for in	ntangible tax under Yes 🄼 No	s. 199.032,
24	9. Name and Address of Curren	29   nt Registered Agent	30		Florida Statutes  10. Name and Address of New Reg		
<del></del>			81	Name			
OLODADY MICHAEL L. ID							
O'GRADY, MICHAEL J., JR. 1000 36TH STREET			82	Street Addr	ess (P.O. Box Number is Not Acceptab	(e)	
VERO BEACH FL 32960			83				
TENO B	CAO!!! E 02000						
			84	City		FL   es   Zir	p Code
11. Pursuant	to the provisions of Sections 617.050	2 and 617.1508, Florida Statut	es, the abov	e-named corp	oration submits this statement for the p ion's board of directors. I hereby accep	urpose of changing	its registered
agent. La	registered agent, or both, in the State am familiar with, and accept the obliga	of Florida. Such change was a ations of, Section 617.0503, Flo	aumorizea bi orida Statute	/ the corporat s.	ion's board of directors. I hereby accep	t the appointment a	is registered
SIGNATURE	· -						
Signature, typed or printed name of registered agent and title if applicable. (NOTE:			E. Registered Age	niuper erutangia ine	ed when rainstating)	DATE	
12. TITLE	<del></del>	ICERS AND DIRECTORS  DELETE		<del></del>	ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECTO	
	D DIODADY MICHAEL 1 4D	C DECEIL	1,1 TITLE			□ Crisii@s	Addition
NAME	O'GRADY, MICHAEL J. ,JR. % 1000 36TH STREET		1.2 NAME	4000000			
STREET ADDRESS	VERO BEACH FL		1.3 STREET ADDRESS 1.4 CITY-ST-ZIP				
CITY-ST-ZIP	PD PD	☐ DELETE	2.1 TITLE	01-£IF		Change	Addition
NAME	HARDEN, DIANE P	<b></b>		Ì		- Avanta	
STREET ADDRESS	1		2.3 STREET	ADDRESS			
CITY - ST - ZIP	VERO BEACH FL	OPLOUE PI		ST-ZIP			
TITLE	STD	DELETE 3.1				☐ Change	Addition
NAME	DRURY, TIM	3.2		[		•	
STREET ADORESS	% 1000 36TH STREET		3.3 STREET	ADDRESS	•		
CITY-ST-ZIP	VERO BEACH FL			ST-ZIP	· · ·		
TITLE	CD	☐ DELETE	4.1 TITLE			. Change	Addition
NAME	EGAN, J.B., III		4. 2 NAME				
STREET ADDRESS	4631 9TH PLACE		4.3 STREET	ADDRESS			
CITY - ST - ZIP	VERO BEACH FL		4.4 CITY - S	T-ZIP	······································		
TITLE	VD	☐ DELETE	5.1 TITLE	1		Change	e 🔲 Addition
NAME	KOZIEL, GERARD J		5.2 NAME				
STREET ADDRESS	1000 36 ST		5.3 STREET	ADDRESS			
CITY - ST-ZIP	VERO BCH FL		5.4 CITY - S	T-ZIP			

5.4 CITY-ST-ZIP

6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

DELETE

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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

CITY - ST- ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE

Daytime Phone # 0020528

☐ Change

☐ Addition

**FILED** 

May 02 1997 8:00am

Secretary of State