NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS** 

## DOCUMENT # N9400001800

1. Corporation Name

SUN-UP OF INDIAN RIVER, INC.

Principal Place of Business

2. Principal Place of Business

Mailing Address

2a. Mailing Address

26

2448 19TH AVE VERO BEACH FL 32960 2448 19TH AVE VERO BEACH FL 32960

## **FILED** Mar 17, 1999 8:00 am Secretary of State

03-17-1999 90081 027 \*\*\*\*61.25

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	Ш				KIN	KII	Ш	Ш

3. Date Incorporated or Qualifed

04/12/1994

63 STREET ADDRESS 1975 SURFSIDE TERRACE

Su	ite, Apt.	#. etc.	Suite, Apt. #, etc.			4. FEI Number	Apr	plied For			
22	31to, 7 tp t.	.,,	27			65-0748943	_ No	t Applicable			
	ty & State		City & State				\$8.75 A	dditional			
<u> </u>	iy a olal		28			5. Certifcate of Status Desired	Fee Re	quired			
23		Country	Zip	Country		6 Election Compaign Financing	\$5.00	May Ba			
Zir	P		<b>⊢</b> ' ⊢	¬ '		6. Election Campaign Financing Trust Fund Contribution	Added to	,			
24		25	29 30	<u> </u>	<del></del>			31003			
		9. Name and Address of Curren	t Registered Agent	81	10. Name and Address of New Registered Agent						
				0'	Name -	JOAN E. GOLDSMITH					
SK	ALACKI	, CATHERINE P		82	82 Street Address (P.O. Box Number is Not Acceptable)						
t .	48 19TH	•			1052 POITRAS DR.						
		CH FL 32960		83							
1		1011 1 E 02000		84	84 City / 50 P 50 A 1 P 85 Zip Code						
	•					RO BEACH		963			
11 0	Purcuant i	to the provisions of Sections 617 050	2 and 617 1508 Florida Statutes	the abov	e-named com	poration submits this statement for the purpose	e of changing its	registered			
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											
a	agent. I a	m familiar with, and accept the obliga	tions of Section 617.0503. Florid	a Statutes	i.	<b>A</b> .	1,-100				
SIGN	IATURE	X anx	carmin			يان کا	<i>! 1   <b>17</b></i>				
·		Signature, typed or printed name of registered agen		gistered Age	nt signature require	ad when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS	AND DIRECTO	RS IN 12			
12.			D DIRECTORS				Change	Addition			
MLE		P	☐ DELETE	1.1 TITLE	$\mathcal{D}$	VALIANI CATHERINE	A Chango				
NAME		SKALACKI, CHATHERINE P .		1.2 NAME	37	KALACKI, CATHERINE					
STREET	TADDRESS	2448 19TH AVENUE		1.3 STREE	TADDRESS 24	148 17 - 100					
CITY-S1	T-ZIP	VERO BEACH FL 32960		1,4 CITY- S	IT-ZIP	PEROBEACH, 7L 32960					
TITLE		T	DELETE	2.1 TITLE	V		Change	Addition			
NAME	1	YATSKO, VIOLA	/ -	2.2 NAME	ω,	ALTER SACKVILLE					
	TADORESS	1964 5TH COURT		2.3 STREE	TADDRESS 9	O BEACHSIDE DR +301					
1		VERO BEACH FL		2.4 CITY-		ERO BEACH , >L 32963					
CITY-S	T-ZIP		DELETE	3.1 TITLE	31-2,IF V	· · · · · · · · · · · · · · · · · · ·	☐ Change	Addition			
TITLE		S CATHERN	224212		'-	TOAN E. GOLDSMITH		•			
NAME		SCHOLZE, KATHLEEN		3.2 NAME		052 POITHAS DR					
STREET	T ADDRESS	43-206 PLANTATION DRIVE		3.3 STREE			_				
CITY-S	T-ZIP	VERO BEACH FL 32960		3.4. CITY-		iero beach, 7l 32963					
TITLE		D	☐ DELETE	4.1 TITLE	5	20	☐ Change	Addition			
NAME		Labella, arthur		4. 2 NAME	[J.	AMES DRAYTON					
STREET	TADDRESS	1300 24TH AVE		4.3 STREE	TADDRESS 🞝	025 SPEING PL					
CITY-S	7.71P	VERO BEACH FL 32960		4.4 CITY-5	ST-ZIP \	VERO BEACH, 7L 3296	. 3				
TITLE		D	DELETE	5.1 TITLE	e	5	Change	Addition			
NAME		MORAN, KAY		5.2 NAME	1	OHAL KRAJEWSKYL					
J		1990 25TH STREET		5.3 STREE	TADORESS /	699 WHITHORE ST					
	T ADÓRESS	1000 -0111 -11		5.4 CITY-5	T-710 C.	EBASTIAN FL 32958					
CITY-S	T-ZIP	VERO BEACH FL 32960	- Doctor	6.1 TITLE			Change	Addition			
TITLE		JOHN F. SWANSON	☐ DELETE X ADDITION		D	) Clase MEELIS	□ cuange	Andonom			
NAME		JOHN P. JUANSON	A HODITON	6.2 NAME	D	ELORES WEEHS	_				

VERO BEICH VERD BEACH 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 suppliemental 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, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

4857 N. NEWPORT ISLAND DRIVE

N94000001860

# 13

additions

Dery Weems
4095 58# Circle
Vero Beach, 71, 32966