## **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 N94000004298 (5) DOCUMENT #

Principal Place of Business	Mailing Address
817 BEACHLAND BLVD. VERO BEACH FL 32963	817 BEACHLAND BLVD. VERO BEACH FL 32963-1806

# **FILED** Apr 18 1997 8:00am Secretary of State

Principal Place of Business   Mailing Address   St. 85614AND 8U.V. VERO BEACH FL 32883   St. 85614AND 8U.V. VERO BEAC	THE M	ioorings so	Quare Associ	IATIO	N, INC.									
VERO BEACH FL 32863  VERO BEACH FL 32863 VERO BEACH FL 32863-1806  2. Principal Place of Business  3. Data incorporated or Qualified  4. FEI Number  5. Cartificate of Status Desired  5. Country  2. Principal Place of Business  5. Continues of Status Desired  6. Election Campaign Financing  7. Trust Fund Contribution  6. This corporation base fall of the trust Place  5. The occupant base base of the Status Business  6. This corporation base fall of the trust Place  5. The occupant base of the Status Business  6. Election Campaign Financing  7. Trust Fund Contribution  6. This corporation base fall of the status Business  6. This corporation base fall of the Status Business  6. This corporation base fall of the status Business  6. This corporation base fall of the status Business  6. This corporation base fall of the Status Business  6. This corporation base fall of the Status Business  6. This corporation base fall of the Status Business  6. This corporation base fall of the Status Business  6. This corporation base fall of the Status Business  6. This corporation base fall of the Status Business  6. This corporation base fall of the Status Business  6. This corporation base fall of the Status Business  6. This corporation base fall of the Status Business  6. This corporation base fall of the Status Business  6. This corporation base fall of the Status Business  6. This corporation base fall of the S	Principal Plac	e of Business		M	ailing Address					\$ 10011101 510 10111 BISH BEHI (611)	dani dani di	(18 <b>5 6</b> 1 <b>576</b> 51	818 SBS	BE 4835 1881
Section   Place of Business   2a. Melling Address   2b. Melling						06								
Suite, Apt #, etc.   Status Desired   Status Desir										3. Date Incorporated or Qualified 08/31/1994	3a. Da	ate of La 04/24/	st Rep 1996	ort
Suite, Api #, etc.    Suite, Api #, etc.   Suite, Api #, etc.	2. Principal P	Place of Business		28.	Mailing Address			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		4. FEI Number			Арр	lied For
City & State				26						28-3503881				Applicable
City & State 28   29   30   Trust Fund Contribution   Added to Fee Zip   Country   Zip   Country   2,	— ` ` `	#, etc.			Suite, Apt. #, etc.					5. Certificate of Status Desired				
20   20   20   20   20   20   20   20	_,,	te		12/1	City & State	····				& Flection Compaign Figureina				
Country   Zip   Country   Zip   Country   State   Country   Stat				28	,					, ,				
9. Name and Address of Current Registered Agent 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent  HENDERSON, STEVE L 817 BEACHLAND BLVD.  VERO BEACH FL 32963  83  64 City  FL 85 Zip Code  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 agent, or both in the State of Florida. Such change was authorized by the corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Section 617 0503, Florida Statutes. The above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Section 617 0503, Florida Statutes.  SIGNATURE  SIGNATURE  12. OFFICERS AND DIRECTORS  13. ADDITIONIS/CHANGES TO OFFICERS AND DIRECTORS IN 1  14. CITY-ST-2P  WERO BEACH FL 32963  14. CITY-ST-2P  VERO BEACH FL 32963  14. CITY-ST-2P  VERO BEACH FL 32963  14. CITY-ST-2P  VERO BEACH FL 32963  15. DELETE  15. TITLE  15. TITLE  15. Change  17. Change  17. Change  17. Change  18. ADDITIONIS/CHANGES TO OFFICERS AND DIRECTORS IN 1  18. ADDITIONIS/CHANGES TO OFFICERS AND DIRECTORS IN 1  19. Change			Country	1	Zip	Co	untry	,			intangible	tax und		
HENDERSON, STEVE L 817 BEACHLAND BLVD. VERO BEACH FL 32963  82 Street Address (P.O. Box Number is Not Acceptable)  83 Street Address (P.O. Box Number is Not Acceptable)  84 City FL 85 Zip Code  85 Zip Code  86 City FL 85 Zip Code  87 City FL 85 Zip Code  88 Zip Code  89 Street Address (P.O. Box Number is Not Acceptable)  89 Street Address (P.O. Box Number is Not Acceptable)  80 Street Address (P.O. Box Number is Not Acceptable)  80 Street Address (P.O. Box Number is Not Acceptable)  81 Name  82 Street Address (P.O. Box Number is Not Acceptable)  83 Street Address (P.O. Box Number is Not Acceptable)  84 City FL 85 Zip Code  85 Zip Code  86 Zip Code  87 Street Address (P.O. Box Number is Not Acceptable)  86 Zip Code  87 Street Address (P.O. Box Number is Not Acceptable)  88 Zip Code  89 Street Address (P.O. Box Number is Not Acceptable)  80 Street Address (P.O. Box Number is Not Acceptable)  81 Street Address (P.O. Box Number is Not Acceptable)  82 Street Address (P.O. Box Number is Not Acceptable)  84 City FL 85 Zip Code  85 Zip Code  85 Zip Code  86 Zip Code  87 Street Address (P.O. Box Number is Not Acceptable)  88 Zip Code  89 Street Address (P.O. Box Number is Not Acceptable)  89 Zip Code  80 Street Address (P.O. Box Number is Not Acceptable)  80 Street Address (P.O. Box Number is Not Acceptable)  80 Street Address (P.O. Box Number is Not Acceptable)  80 Street Address (P.O. Box Number is Not Acceptable)  80 Street Address (P.O. Box Number is Not Acceptable)  80 Street Address (P.O. Box Number is Not Acceptable)  81 Street Address (P.O. Box Number is Not Acceptable)  82 Zip Code  83 Street Address (P.O. Box Number is Not Acceptable)  84 City 85 Street Address (P.O. Box Number is Not Acceptable)  85 Zip Code  85 Zip Code  85 Zip Code  86 Zip Code  86 Zip Code  87 Street Address (P.O. Box Number is Not Acceptable)  87 Street Address (P.O. Box Number is Not Acceptable)  85 Zip Code  85 Zip Code  86 Zip Code  87 Street Address (P.O. Box Number is Not Acceptable)  86 Zip Code  87 Street Address (P.O. Box Number i	24	25		29		30			]	Florida Statutes	Yes	X) No		
HENDERSON, STEVE L 817 BEACHLAND BLVD. VERO BEACH FL 32983  82 Street Address (P.O. Box Number is Not Acceptable)  83 THE 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 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 regist agent. I am tarnillar with, and accept the obligations of, Section 617 0503, Florida Statutes.  SIGNATURE  Signature, hipsel or preted name of registered agent and tile if applicable  OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1  TIME  OP  ORANGE  WINNE, ELWYN  12 MAME  STREET ADDRESS  CITY-ST-2P  VERO BEACH FL 32963  14 City  FL 85 Zip Code  WICTE Registered Agent algebraic required when remitted by accept the appointment as regist agent ag		g, Name and	Address of Current	t Regis	tered Agent					10. Name and Address of New Re	glatered	Agent		
817 BEACHLAND BLVD. VERO BEACH FL 32963  84 City  FL 85 Zip Code  11. Pursuant to the provisions of Sections 617 C502 and 617 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its regist of control of the composition of control of the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Section 617 C502, Florida Statutes.  SIGNATURE  Signature. Signature byted or printed name of registered agent and site if applicable (MOTE, Registered Agent signature required when reinstating)  OFFICERS AND DIRECTORS  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1  TITLE  DP							81	Name						
VERO BEACH FL 32963  84 City FL 85 Zip Code  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 regist agent. I am familiar with, and accept the obligations of Section 617,0503, Florida Statutes.  SIGNATURE  Signature, byte of protect rame of registered agent and the displicable (NOTE Registered Agent aignature required when reinfailing)  DATE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1.1 TIME  WINNE, ELWYN  SIREET ADDRESS  CITY-SI-2P  VERO BEACH FL 32963  14. City-SI-2P  VERO BEACH FL 32963  14. City-SI-2P  VERO BEACH FL 32963  14. City-SI-2P  VERO BEACH FL 32963  22. AUTY-SI-2P  VERO BEACH FL 32963  22. CITY-SI-2P  VERO BEACH FL 32963  22. CITY-SI-2P  VERO BEACH FL 32963  23. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1.2 Make  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1.2 Make  14. City-SI-2P  VERO BEACH FL 32963  14. City-SI-2P  Change I/I  AMAE  LAMPERT, WILLIAM A  22. AUTY-SI-2P  VERO BEACH FL 32963  22. CITY-SI-2P  VERO BEACH FL 32963  23. SIREET ADDRESS  CITY-SI-2P  VERO BEACH FL 32963  34. CITY-SI-2P  TITLE  Change I/I  AMAE  CITY-SI-2P  VERO BEACH FL 32963  34. CITY-SI-2P  TITLE  Change I/I  Chan							82	Street	Addres	ss (P.O. Box Number is Not Acceptal	ole)			
11. Pursuant to the provisions of Sections 617,0502 and 617,1508, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as regists agent. I am familiar with, and accept the obligations of, Section 617,0503, Florida Statutes.  SIGNATURE    Stip-aline, typed or printed name of registered agent and tale of applicable   (NOTE Registered Agent algorature required when reinitiality)   DATE     12.							83	<del> </del>			·			
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 regist office or registered agent, or both, in the State of Florids, Such change was authorized by the corporation's board of directors, I hereby accept the appointment as regist agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.  SIGNATURE  Signature, typed or prefed name of registered agent and telled applicable (NOTE, Registered Agent signature required when reinstating)  DATE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1.1 TITLE  DP	VERU D	EAUTI PL 3280	•											
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 regist of agent, and talk an analysis with, and accept the obligations of, Section 617 05002, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as regist agent. I am familiar with, and accept the obligations of, Section 617 05002, Florida Statutes.  SIGNATURE  Signature. Special name of registered agent and talk 4 applicable. (NOTE Registered Agent signature required when reinstating). DATE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1  TITLE  DP  DELETE  1.1 TITLE  DRAWE  STREET ADDRESS  VERO BEACH FL 32963  1.4 CITY-ST-2IP  VERO BEACH FL 32963  1.4 CITY-ST-2IP  DELETE  2.1 TITLE  DELETE  2.2 TAME  1.155 BOWLINE DR.  2.2 NAME  STREET ADDRESS  CITY-ST-2IP  NAME  STREET ADDRESS  CITY-ST-2IP  NAME  STREET ADDRESS  CITY-ST-2IP  NAME  RICE, HALLIE P SR.  1816 MOORING LINE DRIVE  3.3 STREET ADDRESS  CITY-ST-2IP  TITLE  VERO BEACH FL 32963  3.4 CITY-ST-2IP  TITLE  VERO BEACH FL 32963  4.4 CITY-ST-2IP  TITLE  DELETE  5.1 TITLE  Change  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1  Change  ADDITIONS/CHANGES TO OFFICERS AND DIRE							84	City			Fi	85	Zip Co	ode
SIGNATURE    Signature, typed or printed name of registered agent and talle if applicable   (NOTE, Registered Agent algrature required when reinstating)   DATE	11. Pursuant	to the provisions	of Sections 617.0502	2 and 6	17.1508, Florida Statut	es, the	above	e-named	согро	ration submits this statement for the			ng its	registered
SIGNATURE    Signature, typed or printed name of registered agent and talle if applicable   (NOTE, Registered Agent algrature required when reinstating)   DATE	office or r agent. La	registered agent, a m familiar with, as	or both, in the State indicate a	of Florid ations of	da. Such change was a f. Section 617.0503. Fk	authoriza orida Str	ed by atutes	/ the cor s.	poration	n's board of directors. I hereby acce	pt the app	ointmen	as re	gistered
12. OFFICERS AND DIRECTORS 19. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 19. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS TO OFFICERS TO OFFICERS AND DIRECTORS TO OFFICERS					,			-						
TITLE	SIGNATORIC.	Signalure, typed or prin				E Register	ed Age	ent signature	required					
NAME   WINNE, ELWYN   1.2 NAME   1.3 STREET ADDRESS   2096 WINDWARD WAY   1.3 STREET ADDRESS   1.4 CITY-ST-ZIP   VERO BEACH FL 32963   1.4 CITY-ST-ZIP			OFFICERS AND	DIREC						ADDITIONS/CHANGES TO OFFI	CERS ANI			
STREET ADDRESS CITY-ST-ZIP VERO BEACH FL 32963  TITLE D LAMPERT, WILLIAM A STREET ADDRESS CITY-ST-ZIP  TITLE STD STREET ADDRESS CITY-ST-ZIP  TITLE STD STREET ADDRESS CITY-ST-ZIP  TITLE STD NAME RICE, HALLIE P SR. STREET ADDRESS CITY-ST-ZIP  TITLE VPD STREET ADDRESS CITY-ST-ZIP  TITLE STREET ADDRESS CITY-ST-ZIP TITLE STREE		1 -	n.m.:		L DELETE	1			}			LI Chan	ige	Addition Addition
CITY-ST-ZIP									ł					
TITLE D DELETE 2: TITLE														
NAME  LAMPERT, WILLIAM A  STREET ADDRESS  C-TYST-ZIP  VERO BEACH FL 32963  DELETE  3.1 TITLE  STD  NAME  RICE, HALLIE P SR.  STREET ADDRESS  CITY-ST-ZIP  VERO BEACH FL 32963  3.2 NAME  3.2 NAME  3.2 NAME  3.3 STREET ADDRESS  CITY-ST-ZIP  VERO BEACH FL 32963  DELETE  4.1 TITLE  NAME  ROBERTS, HARRY  4.2 NAME  STREET ADDRESS  LOTY-ST-ZIP  VERO BEACH FL 32963  ALCITY-ST-ZIP  TITLE  ROBERTS, HARRY  4.2 NAME  4.3 STREET ADDRESS  CITY-ST-ZIP  VERO BEACH FL 32963  DELETE  4.4 CITY-ST-ZIP  TITLE  DELETE  Change  ACTIVEST-ZIP  Change  ACTIVEST-ZIP  Change			H FL 32963		T DELETE			iT-ZIP	ļ			Chan		Addition
STREET ADDRESS   1155 BOWLINE DR.   23 STREET ADDRESS   VERO BEACH FL 32983   2.4 CITY-ST-ZIP		1	THE LAKE A		LT DECEME	1						LI CIMI	đe.	T VOUIDO!
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NAME			TI TE GEOOD		DELETE			21-71	<del> </del>			Chan	iae	Addition
STREET ADDRESS   1816 MOORING LINE DRIVE   3.3 STREET ADDRESS			E P SR.			1			}				-	
City-St-ZiP   VERO BEACH FL 32963   3.4. City-St-ZiP						- 1		ADDRESS	1					
TITLE         VPD         DELETE         4.1 TITLE         Change         7           NAME         ROBERTS, HARRY         4.2 NAME         4.2 NAME           STREET ADDRESS         1001 SPYGLASS LANE         4.3 STREET ADDRESS           CITY-ST-ZIP         VERO BEACH FL 32963         4.4 CITY-ST-ZIP           TITLE         DELETE         5.1 TITLE						8			İ					
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STREET ADDRESS CITY-ST-ZIP TITLE  1001 SPYGLASS LANE 43 STREET ADDRESS 44 CITY-ST-ZIP 5.1 TITLE  1001 SPYGLASS LANE 5.1 TITLE 5.1 TITLE  1001 SPYGLASS LANE 5.1 TITLE	NAME	ROBERTS, H	IARRY			4.2	NAME							
CITY-ST-ZIP   VERO BEACH FL 32963   4.4 CITY-ST-ZIP	STREET ADDRESS					4.3	STREET	ADDRESS	}					
TITLE DELETE 5.1 TITLE Change	CITY-ST-ZIP					4.41	CITY-S	T- <b>Z</b> IP	]					
NAME 5.2 NAME	TITLE	\			DELETE	5.1	TITLE					Char	ige	Addition
l l	NAME	Į				5.2	NAME				•			
STREET ADDRESS 5.3 STREET ADDRESS	STREET ADDRESS					5.3	STREET	ADORESS						
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CITY-ST-ZIP 6.4 CITY-ST-ZIP 6.4 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		by postify that the	information supplies	d radials at	sic filing does not a rel				totod !	o Carlino 110 07/2V/) Clarks Contra	o I foresh-	r corrid	hat th	

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: