FILE NOW: FILING FEE IS \$61.25

Mailing Address

2a. Mailing Address

3283 NE SKYLINE DR. JENSEN BEACH FL 34967

Suite, Apt. #, etc.

NONPROFIT CORPORATION ANNUAL REPORT

1998

Principal Place of Business

2. Principal Place of Business

254 N.E. ELM TERRACE JENSEN BEACH FL 34957

Suite, Apt. #, etc.

FLORIDA DEPARTMENT OF STATE

FILED

Apr 17 1998 8:00am

Secretary of State

65-0750228

Applied For Not Applicable

\$8.75 Additional

Fee Required

\$5.00 May Be

3. Date Incorporated or Qualified 11/25/1996

5. Certificate of Status Desired

6. Election Campaign Financing

4. FEI Number

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N9600006090 (2)

INDIAN RIVERSIDE ALLIANCE, INC.

Zip Country Zip Country Zip Country St. This corporation owes or has paid the current year intangible Personal Property Tax dise uluma 30. Yes No No No No No No No N	22		27					т	rust Fund	Contribution		Added to	Fees	
Zip Country Zip 30 S. This corporation owes or has paid the current year intengible Personal Property Tax due June 30 Ves No No No No No No No N	City & State	9	City	City & State				7. 19	this non	profit corpora	tion a homeowi	ners associatio	n?	
9. Name and Address of Current Registered Agent KOEBE, BRUCE A 2477 N.E. DOUG HIGHWAY JENSEN BEACH FL 34957 10. Name and Address of New Registered Agent KOEBE, BRUCE A 2477 N.E. DOUG HIGHWAY JENSEN BEACH FL 34957 12. Corporation 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, 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, 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, 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, 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, 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, or both, in the State agent, and the I spoketise. SIGNATURE Signature, typed or private name of registered agent and the I spoketise. NOTE 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, 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, 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, or both, in the State agent, and the I spoketise. SIGNATURE Deleter 11. Title	23	28						☐ Yes ☐ No						
KOEBE, BRUCE A 2477 N.E. DIXIE HIGHWAY JENSEN BEACH FL 34957 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 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 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 office or registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes. SIGNATURE SIGNATURE Signature, lipide or printed manual registered agent and the II applicable. WHITCAR, JOHN WHITCAR, JOHN WHITCAR, JOHN URLE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE UNITED CHANGE 12. NAME 12. NAME 12. NAME 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE UNITED CHANGE 14. City PL 85 Zip Code PL 15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE UNITED CHANGE 14. City PL 85 Zip Code 15. TITLE UNITED CHANGE 14. City PL 85 Zip Code 15. TITLE UNITED CHANGE 16. Title UNITED CHANGE 17. SIZER ADDRESS 18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 19. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 11. TITLE UNITED CHANGE 12. NAME 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 14. City 15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 16. NAME 17. SIZER ADDRESS 18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 19. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 19. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 19. ADDITIONS/CHANGES TO OFF	_ ′	Country	Zip		Countr	У		8. T	his corpo	ration owes o	r has paid the	current year Int	angible	
KOEBE, BRUCE A 2477 N.E. DDGE HRGHWAY JENSEN BEACH FL 34957 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 Orligations of Josephan Josep	24] No	
KOEBE, BRUCE A 2477 N.E. DIDE HIGHWAY JENSEN BEACH FL 34957 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 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 office or registered agent, or both, in the State of Florida Statutes. SIGNATURE SIGNATURE SIGNATURE SUpenhure, liped or privad name of registered agent and the if applicable. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE D	Name and Address of Current Registered Agent													
2477 N.E. DXIE HIGHWAY JENSEN BEACH FL 34957 83 64 City FL 65 Zip Code T1. 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. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes. SIGNATURE Signature, lyced or private name of registered agent and title 1 applicable. NAME WHITICAR, JOHN 12 NAME WHITICAR, JOHN 12 NAME WHITICAR, JOHN 12 NAME 13 SIRRET ADDRESS CITY-ST-ZIP JENSEN BEACH FL 34957 TILE D DELETE 14 CITY-ST-ZIP DELETE 15 TITLE D D CHange Addition Addition NAME SIRRET ADDRESS STUART FL 34997 24 City-ST-ZIP TITLE D D CHange Addition Addition SIRRET ADDRESS STUART FL 34997 24 City-ST-ZIP DELETE 33 SIRRET ADDRESS STUART FL 34997 24 City-ST-ZIP TITLE D D CHange Addition Addition NAME SMITH, DOUG STREET ADDRESS 25 N.E. SKyline Dr. JENSEN BEACH FL 34957 34 City-ST-ZIP TITLE D Change Addition Addition Addition Addition SIRRET ADDRESS STUART FL 34997 24 City-ST-ZIP TITLE D Change Addition Addition ALT STREET ADDRESS STUART FL 34997 24 City-ST-ZIP DELETE 33 STREET ADDRESS STUART FL 34997 24 City-ST-ZIP DELETE 34 City-ST-ZIP Change Addition Addition Addition ALT STREET ADDRESS STUART FL 34997 34 City-ST-ZIP TITLE D Change Addition Addition ADDITIONS CHANGES SCHOOL STREET ADDRESS STUART FL 34997 34 City-ST-ZIP TITLE D Change Addition Addition Addition Addition Addition ADDITIONS CHANGES SCHOOL STREET ADDRESS ADDITIONS CHANGES SCHOOL STREET ADDRESS STUART FL 34997 34 City-ST-ZIP TITLE Change Addition Addition Addition ADDITIONS CHANGES SCHOOL STREET ADDRESS ADDITIONS CHANGES SCH					81	1 1	Name							
2477 N.E. DODE HIGHWAY JENSEN BEACH FL 34957 11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the advanced by the 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, and accept the obligations of, Section 617.0503, Florida Statutes. SIGNATURE Signature, hybel or prince have of required agent and this If applicable (NOTE Registered Agent algorithms required when reinstating) Determine De	2477 N.E. DIXIE HIGHWAY						12 Street Address (P.O. Box Number is Not Acceptable)							
Set City FL St Zip Code														
TIT. 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. Thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes. SIGNATURE Signature. In the state of provide and accept the obligations of, Section 617.0503, Florida Statutes. SIGNATURE Signature. In the state of provided when reinstating) DATE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DATE 1.1 TITLE DATE Change Addition A705 N.E. PALMETTO DRIVE 1.3 STREET ADDRESS 4705 N.E. PALMETTO DRIVE 1.3 STREET ADDRESS 4705 N.E. PALMETTO DRIVE 1.4 CITY-S1-2IP TITLE DELETE 2.1 TITLE DELETE 2.1 TITLE DELETE 2.1 TITLE DELETE 3.1 TITLE DELETE 3.1 TITLE DELETE 3.1 TITLE DELETE 3.1 TITLE DELETE 4.1 TITLE Change Addition							83							
TIT. 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. Thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes. SIGNATURE Signature. In the state of provide and accept the obligations of, Section 617.0503, Florida Statutes. SIGNATURE Signature. In the state of provided when reinstating) DATE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DATE 1.1 TITLE DATE Change Addition A705 N.E. PALMETTO DRIVE 1.3 STREET ADDRESS 4705 N.E. PALMETTO DRIVE 1.3 STREET ADDRESS 4705 N.E. PALMETTO DRIVE 1.4 CITY-S1-2IP TITLE DELETE 2.1 TITLE DELETE 2.1 TITLE DELETE 2.1 TITLE DELETE 3.1 TITLE DELETE 3.1 TITLE DELETE 3.1 TITLE DELETE 3.1 TITLE DELETE 4.1 TITLE Change Addition						٠,	City					les Zin	Codo	
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 agent and accept the obligations of, Section 617,0503, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and the if applicable (NOTE Registered Agent algorithms required when reinstating) DATE 12. OFFICERS AND DIRECTORS 12. TITLE DELETE 1.1 TITLE WHITICAR, JOHIN 12 NAME STREET ADDRESS 4705 N.E. PALMETTO DRIVE 13. STREET ADDRESS (CITY-ST-2IP) JENSEN BEACH FL 34957 1.4 CITY-ST-2IP TITLE D DELETE 2.1 TITLE D DELETE 2.1 TITLE D DELETE 3.1 TITLE D D D D D D D D D D D D D D D D D D D					[~	" '	City				F	L 65 210	C008	
SIGNATURE Signature, typed or private name of registered agent and the if applicable (NOTE: Registered Agent algoritume required when reinstating) DATE	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													
SIGNATURE Signature, typed or private name of registered agent and title if applicable. (NOTE: Registered Agent algoriture required when reinstating) DATE	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 spent. I am familiar with, and accept the obligations of, Section 617,0503, Florida Statutes.													
Stgrature, typed or printed name of registered spent and the II applicable. (NOTE: Registered Appert signature required when reinstating) DATE	1		,4										ì	
TITLE D DELETE 1.1 TITLE DELETE 1.1 TITLE DELETE DELETE DELETE 1.1 TITLE DELETE		Signature, typed or printed name of registered ag	ent and title if applic	able. (NOTE:	Registered Ac	gent i	signature required	when re	instating)		DATE			
NAME WHITICAR, JOHN 12 NAME 13 STREET ADDRESS 14 CITY-ST-ZIP JENSEN BEACH FL 34957 14 CITY-ST-ZIP Change Addition	12.	OFFICERS AN	ID DIRECTORS		13.			ĀD	DITIONS,	CHANGES TO	O OFFICERS A	ND DIRECTOR	S IN 12	
STREET ADDRESS CITY-ST-ZIP JENSEN BEACH FL 34957 TITLE CLARK, DENNIS STREET ADDRESS 3849 S.E. QUANSET TERRACE CITY-ST-ZIP TITLE D DELETE 2.1 TITLE CLARK, DENNIS STREET ADDRESS CITY-ST-ZIP TITLE D DELETE 3.1 TITLE D Change Addition Change Addition Change Addition Change Addition Change Addition Change Addition Change Addition Change Addition Change Addition SMITH, DOUG STREET ADDRESS 2.4 CITY-ST-ZIP TITLE D DELETE 3.3 STREET ADDRESS 2.54 N.E. ELM TERRACE 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP JENSEN BEACH FL 34957 TITLE T DELETE 4.1 TITLE Change Addition	TITLE	D	DELETE		1.1 TITLE	1.1 TITLE				-		Change	Addition	
TITLE D	NAME WHITICAR, JOHN 1.21					? NAME						ļ		
TITLE D DELETE 21 TITLE CLARK, DENNIS 22 NAME STREET ADDRESS 3849 S.E. QUANSET TERRACE 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP STUART FL 34997 TITLE D D DELETE 3.1 TITLE D Change Addition NAME SMITH, DOUG 32 NAME STREET ADDRESS 254 N.E. ELM TERRACE 3.3 STREET ADDRESS 3.3 STREET ADDRESS 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP TITLE T DELETE 4.1 TITLE DELETE 4.1 TITLE NAME SMITH, VIVACA 4.2 NAME STREET ADDRESS 3283 NE SKYLINE DR. 4.3 STREET ADDRESS 3283 NE SKYLINE DR. 4.4 CITY-ST-ZIP TITLE D DELETE 5.1 TITLE DELETE 4.4 CITY-ST-ZIP TITLE D DELETE 5.1 TITLE DELETE ADDRESS 4.4 CITY-ST-ZIP TITLE D DELETE 5.1 TITLE D Change Addition	STREET ADDRESS						3 STREET ADDRESS							
NAME CLARK, DENNIS STREET ADDRESS STEAT ADDRESS STUART FL 34997 TITLE D SMITH, DOUG STREET ADDRESS STREET ADDR	CITY-ST-ZIP					1.4 CITY - ST - ZIP							Ì	
STREET ADDRESS CITY-ST-ZIP STUART FL 34997 ITILE D SMITH, DOUG SMEET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.2 NAME 3.3 STREET ADDRESS 2.54 N.E. ELM TERRACE 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP ITILE T SMITH, VIVACA AME SMITH, VIVACA STREET ADDRESS 3.283 NE SKYLINE DR. 4.2 NAME 4.2 NAME 4.3 STREET ADDRESS CITY-ST-ZIP ITILE DELETE 4.1 TITLE C Change Addition Change Addition Change Addition Change Addition	TITLE	D	DELETE		2.1 TITLE							Change	Addition	
STREET ADDRESS CITY-ST-ZIP STUART FL 34997 ITILE D SMITH, DOUG SMEET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.2 NAME 3.3 STREET ADDRESS 2.54 N.E. ELM TERRACE 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP ITILE T SMITH, VIVACA AME SMITH, VIVACA STREET ADDRESS 3.283 NE SKYLINE DR. 4.2 NAME 4.2 NAME 4.3 STREET ADDRESS CITY-ST-ZIP ITILE DELETE 4.1 TITLE C Change Addition Change Addition Change Addition Change Addition	NAME	CLARK, DENNIS			2.2 NAME									
TITLE D DELETE 3.1 TITLE	STREET ADDRESS		CE		2.3 STREE	ET AD	DRESS)	
TITLE D DELETE 31 TITLE SMITH, DOUG 32 NAME 32 NAME 32 NAME 33 STREET ADDRESS 254 N.E. ELM TERRACE 33 STREET ADDRESS 34. CITY-ST-ZIP JENSEN BEACH FL 34957 34. CITY-ST-ZIP DELETE 4.1 TITLE Change Addition NAME SMITH, VIVACA 4.2 NAME STREET ADDRESS 3283 NE SKYLINE DR. 4.3 STREET ADDRESS CITY-ST-ZIP JENSEN BEACH FL 4.4 CITY-ST-ZIP TITLE DELETE 5.1 TITLE DELETE 5.1 TITLE DELETE ADDRESS ADDRESS DEACH FL DELETE 5.1 TITLE DELETE ADDRESS ADDRESS ADDRESS DEACH FL DELETE 5.1 TITLE DELETE ADDRESS ADD	CITY-ST-ZIP	STUART FL 34997			2.4 CITY-	-ST-	ZIP						l	
STREET ADDRESS 254 N.E. ELM TERRACE 33 STREET ADDRESS 3 28 3 N E SKylin & Dr.				DELETE							·	Change	Addition	
STREET ADDRESS 254 N.E. ELM TERRACE 33 STREET ADDRESS 3 28 3 N.E. SKylin & Dr.	NAME	SMITH, DOUG			3.2 NAME	3.2 NAME							Ì	
CITY-ST-ZIP JENSEN BEACH FL 34957 3.4. CITY-ST-ZIP TITLE T	STREET ADDRESS				3.3 STREE	3.3 STREET ADDRESS 32			NE	SKylir	e Dr.			
TITLE T DELETE 4.1 TITLE Grange Addition NAME SMITH, VIVACA 4.2 NAME STREET ADDRESS 3283 NE SKYLINE DR. 4.3 STREET ADDRESS GITY-ST-ZIP TITLE DELETE 5.1 TITLE Grange Addition Change Addition Change Addition										-7				
STREET ADDRESS CITY-ST-ZIP STREET ADDRESS LOTY-ST-ZIP STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP STREET ADDRESS 4.5 TITLE Change Addition		1		DELETE	_							Change	Addition	
STREET ADDRESS CITY-ST-ZIP STREET ADDRESS LOTY-ST-ZIP STREET ADDRESS LOTY-ST-ZIP STREET ADDRESS LOTY-ST-ZIP Change Addition	NAME	SMITH, VIVACA		_	4.2 NAME	E							_	
CITY-ST-ZIP JENSEN BEACH FL 4.4 CITY-ST-ZIP TITLE DELETE 5.1 TITLE Change Addition	1						ORESS							
TITLE													ì	
NAME SAMILE				DELETE		_						Change	☐ Addition	
	NAME			_	5.2 NAME							_ •		
STREET ADDRESS 53 STREET ADDRESS	\						nress						}	
CITY-ST-ZIP 54 CITY-ST-ZIP														
TITLE DELETE 6.1 TITLE Change Addition				DELETE		_	LIT				· · · · · · · · · · · · · · · · · · ·	Change	Addition	
NAME 62 NAME	\						{							
STREET ADDRESS 6.3 STREET ADDRESS	l				I '		nnesee							

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

SIGNATURE:

##-898 5W-334-4303