

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 MAY -1 AM 10:08

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P95000000125 (1)**

1. Corporation Name

LRC OF ST. LUCIE COUNTY, INC.

Principal Place of Business

**2081 E. OCEAN BLVD.
STUART FL 34996**

Mailing Address

**2081 E. OCEAN BLVD.
STUART FL 34996**

DO NOT WRITE IN THIS SPACE

3. Date incorporated or Qualified

12/29/1994

3a. Date of Last Report

4. FEI Number

☒ Applied For

☐ Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

☐

**\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes

☐ Yes

☒ NO

2. Principal Place of Business

9803 S. OCEAN DR

2a. Mailing Address

9803 S. OCEAN DR

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

JENSEN BEACH, FL

City & State

JENSEN BEACH, FL

Zip

Country

34957

ST. LUCIE

Zip

Country

34957

ST. LUCIE

9. Name and Address of Current Registered Agent

**MCCARTHY, TERENCE P
2081 E. OCEAN BLVD.
STUART FL 34996**

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE

Signature (Typed or printed name of registered agent and two applications)

Signature (Typed or printed name of registered agent and two applications)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

11 TITLE
12 NAME
13 STREET ADDRESS
14 CITY - ST - ZIP

**PRESIDENT
DAN LUNDSTROM
9803 S. OCEAN DR
JENSEN BEACH, FL 34957**

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

21 TITLE
22 NAME
23 STREET ADDRESS
24 CITY - ST - ZIP

**V. PRESIDENT
JEFF RIEMER
9803 S. OCEAN DR.
JENSEN BEACH, FL 34957**

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

31 TITLE
32 NAME
33 STREET ADDRESS
34 CITY - ST - ZIP

**SEE TREAS
MIKE CURIST
9803 S. OCEAN DR.
JENSEN BEACH, FL 34957**

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

41 TITLE
42 NAME
43 STREET ADDRESS
44 CITY - ST - ZIP

**SEE TREAS
MIKE CURIST
9803 S. OCEAN DR.
JENSEN BEACH, FL 34957**

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

51 TITLE
52 NAME
53 STREET ADDRESS
54 CITY - ST - ZIP

**SEE TREAS
MIKE CURIST
9803 S. OCEAN DR.
JENSEN BEACH, FL 34957**

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

61 TITLE
62 NAME
63 STREET ADDRESS
64 CITY - ST - ZIP

**SEE TREAS
MIKE CURIST
9803 S. OCEAN DR.
JENSEN BEACH, FL 34957**

☐ Change ☐ Addition

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, the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13, if changed, or on an amendment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/28/95 407-229-1300