03-11-1999 90184 019 ***150.00

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9600003582

SOUTHERN PROPERTIES OF INDIAN RIVER COUNTY, INC.

Principal Place	of Business	Mailing Address										
-2255-11TH LAN	-2255-11TH-LANE-											
VERO BEACH FL 32960—		VERO BEACH FL 32960 US			ĺ	DO NOT WRITE IN THIS SPACE						
US		08			3	Date Incorpo	orated or Qualifed					
					"	01/11/199					Ì	
2 Principal Pl	ace of Business	2a. Mailing Address			4.	. FEI Number				Appl	ied For	
2. Finicipal 1.	ORLH CALIBLE SIE	26 115 29+H COG	RI	5.10	ا پر	65-06341	33				Applicable	
Suite Ant	79+11 COURT S.W.	Suite. Apt. #, etc.	//	<u> </u>	1				\$8.7	75 Ad	ditional	
22	,, 0.0.	27			5.	. Certifcate of	Status Desired		Fe	e Requ	uired	
City & State)	City & State			6. Election Campaign Financing \$5.00 May Be						lay Be	
23		28				Trust Fund (Contribution		Add	ded to	Fees	
Zip	Country	Zip CO/S	Country		8	. This corpora	tion owes the cur	rent year Inta		_	_	
24 3296	8 25	zip 32968 30				Personal Pro	 		Yes	<u></u> ≱	₫No_	
	9. Name and Address of Current				10	, Name and	Address of New	Registered /	Agent			
150	MADO I AMPENCE V		81	Name								
LEONARD, LAWRENCE Y				Street /	Address (ddress (P.O. Box Number is Not Acceptable)						
817 BEACHLAND BLVD. VERO BEACH FL 32963							<u> </u>					
VER	D DEACH FL 32903		83								1	
			84	City					85	Zip Co	ode	
								<u>FL</u>	ᆛᆛ			
office or re	to the provisions of Sections 607.0502 egistered agent, or both, in the State of m familiar with, and accept the obligation	Florida, Such change was authori	ized by	the corpo	corporation s b	on submits this loard of directo	ors. I hereby acce	pt the appoir	itment a	as regi	stered	
SIGNATURE					_							
OIGIW/ITO/NE	Signature, typed or printed name of registered agent			t signature re				DATE	ם סוסר	CTOR	C IN 12	
12.	OFFICERS AND		13.			ADDITIONS/G	CHANGES TO OF	FICERS AN	Cha		Addition	
TITLE	D DOTT MARKS	_	.1 TITLE							go		
NAME	ROTT, JAMES		2 NAME			an LH	COURT	5.W.			ļ	
STREET ADDRESS	-2255-11TH-LANE-			ADDRESS	115	27711	<i>συ ω γ</i> ε.	209/0			Ì	
CITY-ST-ZIP	VERO BEACH FL-32960		.4 CITY-S	T-ZIP			COURT	100	Cha	nge	[Addition	
TITLE	D DOTT MADY	_										
NAME	ROTT, MARY		.2 NAME		116	ea LH	COURT	S.W	i		ĺ	
STREET ADDRESS	-2255-11TH-LANE			ADDRESS	//3	dyin		32968	<i>,</i> '			
CITY-ST-ZIP	VERO BEACH FL 32960-		4 CITY-5	T-ZIP		<u> </u>		200/00	☐ Cha	ange	Addition	
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NAME				TADDRESS								
STREET ADDRESS			.4 CITY-S	- 1								
CITY-ST-ZIP			1.4 CH 1-3	1-211					 ☐ Cha	ange	Addition	
TITLE		_ occen	3.2 NAME	1							1	
NAME			. L INTUNE		l						Į	

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 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or of an attachment with an address with all other like empowered.

63 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE

STREET ADDRESS