

2-5-97 B-1399 NC
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FILED
 Feb 05 1997 8:00am
 Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997



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

DOCUMENT # 707934 (6)
 1. Corporation Name
 CAY POLYNESIA APARTMENT ASSOCIATION, INC. A COND OMINIUM



Principal Place of Business Mailing Address
 923 CRANDON BLVD SUITE 219 KEY BISCAIYNE FL 33149
 % CPM CORPORATION 170 OCEAN LANE DR KEY BISCAIYNE FL 33149-1460 US

3. Date Incorporated or Qualified 10/09/1964
 3a. Date of Last Report 03/13/1996
 4. FEI Number 59-1097058 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 2a. Mailing Address
 21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.
 22 City & State 27 City & State
 23 Zip Country 28 Zip Country
 24 25 29 30

9. Name and Address of Current Registered Agent
 C P M CORPORATION
 170 OCEAN LANE DR
 KEY BISCAIYNE 33149

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 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. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		
TITLE	PD	<input type="checkbox"/> DELETE
NAME	LESER, GEORGE	
STREET ADDRESS	255 SUNRISE DR #106	
CITY-ST-ZIP	KEY BISCAIYNE FL	
TITLE	VPD	<input type="checkbox"/> DELETE
NAME	PRINZY, ANTHONY	
STREET ADDRESS	255 SUNRISE DRIVE	
CITY-ST-ZIP	KEY BISCAIYNE FL	
TITLE	T	<input type="checkbox"/> DELETE
NAME	WASHBURN, CORINNA	
STREET ADDRESS	255 SUNRISE DR #204	
CITY-ST-ZIP	KEY BISCAIYNE FL	
TITLE	S	<input type="checkbox"/> DELETE
NAME	DEL VAHE, MAGDA	
STREET ADDRESS	255 SUNRISE DR.	
CITY-ST-ZIP	KEY BISCAIYNE FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	FRANK, LIANE	
STREET ADDRESS	255 SUNRISE DRIVE	
CITY-ST-ZIP	KEY BISCAIYNE FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
1.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY-ST-ZIP		
2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
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 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: *[Signature]* 1-25-97 361-2662
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone # 0030707

CR2E037 (9/96)