FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT # 720307

(8)

PROVINCIAL REALTY ASSOCIATES, INC.									
Principal Place	of Business	Mailing Address						ELDIL BIBIL BIBIL	
9401 BISCAYNE BLVD MIAMI SHORES FL 33138 9401 BISCAYNE BLVD MIAMI SHORES FL 33138									
						3. Date Incorporated or Qualified 02/22/1971	3a. Date of L 01/2	ast Report 7/1995	
2. Principal Pla	2a. Mailing Address	ling Address			4. FEI Number	Applied For Not Applicable			
Suite, Apt. #	H oto	Suite, Apt. #, etc.				59-0865839			
22	#, BIC.	27	· · · · · ·			5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & State		City & State				6. Election Campaign Financing	\$5	.00 May B	3e
23		28	1 -			Trust Fund Contribution		dded to Fees	
Zip 24	Country Z _{IP} 29 3			ntry	•	This corporation has liability for intangible tax under s. 199 032, Florida Statutes			
29	9. Name and Address of Current		30			10. Name and Address of New Re			
				81	Name		<u> </u>		
FITZGERALD, J. PATRICK				82	Street A	Idress (P.O. Box Number is Not Acceptable)			
110 MERRICK WAY					Oli CCI 7	Address II. C. Box Hambor is Not recopilion)			
SUITE 2	701			63					
CORAL	GABLES FL 33134			84	City		85	Zip Code	
44 (1)	the provisions of Cochons 517 0500	and 517 1509 Clarida Statut.	oo tho nhơ		named see	poration submits this statement for the purp	FL S	ite registered	1 office
or register	ed agent, or both, in the State of Florid th, and accept the obligations of, Section	la. Such change was authorize	ed by the c	orp	oration's b	poration such its this statement for the purposard of directors. I hereby accept the appo	intment as registe	red agent. I	am
SIGNATURE .	Signature, typed or printed name of registered agent a	and the Level colds	II. Honotono	Acres	of rows they are	jured when reinstaling)	DATE		
12.	OFFICE'RS AND		13.	AUH	it signature ret	ADDITIONS/CHANGES TO OFFI		OTORS IN 12	2
TITLE	SD	DELETE				· · · · · · · · · · · · · · · · · · ·	Char	nge 🔲 Add	dition
NAME	WILLIAM HENNESSEY		1.2 N	NAME STREET ADDRESS					
STREET ADDRESS	9401 BISCAYNE BLVD		1.3 5						
CITY - ST - ZIP	MIAMI SHORES, FL 00000				ST-ZIP				
TITLE	VD	_		m		VD	☐ Char	nge 🖾 Add	dition
NAME	BRICE, FREDERICK J		22 N			omas Marin			
STREET ADDRESS	9401 BISCAYNE BLVD				ADDRESS	0401 Biscayne Blvd. Miami Shores, FL. 33138			
CITY-ST-ZIP TITLE		MIAMI SHORES, FL 00000		2 4 CITY - ST - ZIP 3.1 TITLE		MIAMI SHOLES, FL.	Char	nge 🗍 Add	dition
NAME	PD Vaughan, John J.	Досин	3.1 N				[C	a. 🗀	union.
STREET ADDRESS	9401 BISCAYNE BLVD				T ADDRESS				
City-St-ZIP					ST-ZIP				
TITLE				4 1 TITLE			☐ Cha	nge 🔲 Add	dition
NAME	•		4.21	AME					
STREET ADDRESS			4.3 S	TREFT	T ADDRESS				
CHTY - ST - ZIP			4.4 C	iΤγ - \$	ST-ZIP				
Tritue		DELETE	5.1 T	TLE			☐ Cha	nge 🗌 Add	dition
NAME			52 N						
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CITY-ST-ZIP		DELETE	54 C		ST-ZIP		Cha	nge 🗌 Add	dition
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STREET ADDRESS					T ADDRESS				
CITY-ST-ZIP					ST-ZIP				
14. Ldo hereb	y certify that the information supplied v	vith this filing is voluntarily furr	nished and	doe	s not qual	ify for the exemption stated in Section 119.	07(3)(k), Florida S	tatutes. I furt	her
oath: that	It the information indicated on this annual am an officer or director of the corpoin Block 12 or Block 13 if changed, or o	ration or the receiver or truste on an attachment with an add	e emoowe	is tri	ue and acc to execute	curate and that my signature shall have the attribute this report as required by Chapter 617, Flo	same legal effect orida Statutes; an	as ii made ui d that my nai	.me

SIGNATURE:

Signature and typed on Ainted name of Signing Officer or Direction

John J. Vaughan, President

1-22-96 757-6241

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