

FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # 722619 (4)
1. Corporation Name

FIFTY GULFSIDE CONDOMINIUM, INC.



Principal Place of Business: 50 GULF BLVD. INDIAN ROCKS BCH FL 34635
Mailing Address: 50 GULF BLVD. INDIAN ROCKS BCH FL 34635

3. Date Incorporated or Qualified: 02/07/1972
3a. Date of Last Report: 04/03/1995

2. Principal Place of Business: 21
2a. Mailing Address: 26

4. FEI Number: 59-1577833
Applied For: Not Applicable

Suite, Apt. #, etc.: 22
City & State: 23

5. Certificate of Status Desired: \$8.75 Additional Fee Required

City & State: 27
City & State: 28

6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees

Zip: 24
Country: 25
Zip: 29
Country: 30

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

JACKMAN, DAVID
924 IRENE AVE.
LARGO FL 34641

81 Name: Waldock Louis
82 Street Address (P.O. Box Number is Not Acceptable): 14640 Fairlane
83 City & State: Livonia, Mi. 48154
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: *Louis Waldock* Louis Waldock, President DATE: 4-29-96

12. OFFICERS AND DIRECTORS

TITLE	PD	<input checked="" type="checkbox"/> DELETE
NAME	JACKMAN, DAVID	
STREET ADDRESS	924 IRENE AVE.	
CITY - ST - ZIP	LARGO FL 34641	
TITLE	SD	<input type="checkbox"/> DELETE
NAME	FLEISCHER, LOUIS	
STREET ADDRESS	2522 CRAVEY DR.	
CITY - ST - ZIP	ATLANTA GA 30345	
TITLE	TD	<input type="checkbox"/> DELETE
NAME	FISCUS, RONALD	
STREET ADDRESS	2435 UPLONG DR.	
CITY - ST - ZIP	W. BLOOMFIELD MI 48324	
TITLE	VP	<input checked="" type="checkbox"/> DELETE
NAME	WALDOCK, LOUIS	
STREET ADDRESS	14640 FAIRLAND	
CITY - ST - ZIP	LIVONIA MI	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	President	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	Waldock Louis	
1.3 STREET ADDRESS	14640 Fairlane	
1.4 CITY - ST - ZIP	Livonia, Mi. 48154	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.1 TITLE	Vice President	
2.2 NAME	Wells Gina	
2.3 STREET ADDRESS	1301 Estatewood Dr.	
2.4 CITY - ST - ZIP	Brandon, FL. 33510	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.1 TITLE	Director	
3.2 NAME	Vones Viola	
3.3 STREET ADDRESS	49 Daniels St.	
3.4 CITY - ST - ZIP	Toronto, Canada M8Y 1M2	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.1 TITLE		
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	800001848048	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	-06/03/96--01049--011	
6.3 STREET ADDRESS	***61.25	
6.4 CITY - ST - ZIP		

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 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: *Ronald Fiskus* DATE: 4/10/96

CR2E037 (12/95)