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Jun 09 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 # 725706 (6)
1. Corporation Name
MYAKKA VALLEY RANCHES IMPROVEMENT ASSOCIATION, INC.



Principal Place of Business: 74-10A MYAKKA VALLEY TRAIL, PO BOX 21463, SARASOTA FL 34276-4463
Mailing Address: 74-10A MYAKKA VALLEY TRAIL, PO BOX 21463, SARASOTA FL 34276-4463

2. Principal Place of Business (21) Suite, Apt. #, etc. (22) City & State (23) Zip (24) Country (25)
2a. Mailing Address (26) Suite, Apt. #, etc. (27) City & State (28) Zip (29) Country (30)

3. Date Incorporated or Qualified: 03/02/1973
3a. Date of Last Report: 05/01/1996
4. FEI Number: 59-1510999
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

9. Name and Address of Current Registered Agent
GOCIO, WILLIAM
6641 COUNTRY RD
SARASOTA FL 34241

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		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD WALLACE, MICHAEL 6651 PRAIRIE JUNCTION TR SARASOTA FL	<input type="checkbox"/> DELETE	1.1 TITLE VP <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	GOCIO, WILLIAM 6641 COUNTRY RD. SARASOTA FL	<input type="checkbox"/> DELETE	2.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	V ZABIK, MARK 6965 OLD RANCH RD SARASOTA FL	<input checked="" type="checkbox"/> DELETE	3.1 TITLE P Ken Leon 5251 Myakka Valley Trail Sarasota, FL 34241 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE	D DAVISON, PATSY 6850 MYAKKA VALLEY TR SARASOTA FL	<input checked="" type="checkbox"/> DELETE	4.1 TITLE S Susana Pouso 5549 Howard Creek Rd. Sarasota, FL 34241 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE	D PITTMAN, BETTY 5952 SHEPS ISLAND RD SARASOTA FL	<input type="checkbox"/> DELETE	5.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	S GRANT, ROSENSTEEL 6452 KICKAPOO RD. SARASOTA FL	<input checked="" type="checkbox"/> DELETE	6.1 TITLE D Kathryn Thompson 4834 Myakka Valley Tr. Sarasota, FL 34241 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(j), 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 _____

CR2E037 (9/96)