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Jan 17 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 # 729233 (7)
1. Corporation Name
COSTA DEL SOL ASSOCIATION, INC.



Principal Place of Business Mailing Address
1 COSTA DEL SOL BLVD MIAMI FL 33178
1 COSTA DEL SOL BLVD MIAMI FL 33178-2309

3. Date Incorporated or Qualified 04/03/1974
3a. Date of Last Report 02/21/1996
4. FEI Number 59-1804186
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 28 Country 29 Zip 30 Country

9. Name and Address of Current Registered Agent
HYMAN, MICHAEL L ESQ.
44 WEST FLAGLER STREET
14TH FLOOR
MIAMI FL 33130

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 BECHAMPS, EUGENE
NAME BECHAMPS, EUGENE
STREET ADDRESS ONE COSTA DEL SOL BLVD.
CITY-ST-ZIP MIAMI FL 33178
TITLE VPD DROTMAN, CAROLYN
NAME DROTMAN, CAROLYN
STREET ADDRESS ONE COSTA DEL SOL BLVD.
CITY-ST-ZIP MIAMI FL 33178
TITLE TD CHAPMAN, JOHN
NAME CHAPMAN, JOHN
STREET ADDRESS ONE COSTA DEL SOL BLVD.
CITY-ST-ZIP MIAMI FL 33178
TITLE SD GLASS, SUSAN
NAME GLASS, SUSAN
STREET ADDRESS ONE COSTA DEL SOL BLVD.
CITY-ST-ZIP MIAMI FL 33178

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP
2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP
3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP
4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP
5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP
6.1 TITLE
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: *Eugene A. Bechamps* EUGENE BECHAMPS 1-6-97
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone # 305-572-2492

CR2E037 (9/96)