

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 # 730733 (3)
1. Corporation Name
ROSSMOOR BAHAMA VILLAGE ASSOCIATION, INC.



Principal Place of Business Mailing Address
1310 AVENUE OF THE STARS COCONUT CREEK FL 33066

3. Date Incorporated or Qualified: 09/12/1974
3a. Date of Last Report: 04/26/1995
4. FEI Number: 59-1554406
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 24 Country 25 29 Zip 30 Country

9. Name and Address of Current Registered Agent
**RAVO, PAT T.
1310 AVENUE OF THE STARS
% WYNMOOR COMMUNITY COUNCIL, INC.
COCONUT CREEK FL 33066**

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 signing required when reinstating) _____ DATE _____

12. OFFICERS AND DIRECTORS

TITLE	S	<input checked="" type="checkbox"/> DELETE
NAME	ABEL, PHYLLIS	
STREET ADDRESS	1212 C2 BAHAMA BEND	
CITY-ST-ZIP	COCONUT CREEK FL	
TITLE	P	<input type="checkbox"/> DELETE
NAME	RUSSO, BETTY	
STREET ADDRESS	1207 F-2 BAHAMA BEND	
CITY-ST-ZIP	COCONUT CREEK FL 33066	
TITLE	D	<input type="checkbox"/> DELETE
NAME	CUSIMANO, JOSEPH	
STREET ADDRESS	1209 E-2 BAHAMA BEND	
CITY-ST-ZIP	COCONUT CREEK FL	
TITLE	T	<input checked="" type="checkbox"/> DELETE
NAME	ABOLAFIA, BOB	
STREET ADDRESS	1202 F-2 BAHAMA BEND	
CITY-ST-ZIP	COCONUT CREEK FL 33066	
TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	ALBINO, BUDDY	
STREET ADDRESS	1208 C-1 BAHAMA BEND	
CITY-ST-ZIP	COCONUT CREEK FL 33066	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS-CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	S/D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	Barbara DiFiore	
1.3 STREET ADDRESS	1208 Bahama Bend, Apt. A-1	
1.4 CITY-ST-ZIP	Coconut Creek, FL 33066	
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	T/D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.2 NAME	Sol Lurie	
4.3 STREET ADDRESS	1202 Bahama Bend, Apt. D-1	
4.4 CITY-ST-ZIP	Coconut Creek, FL 33066	
5.1 TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
5.2 NAME	Susan Liscio	
5.3 STREET ADDRESS	1207 Bahama Bend, Apt. B-2	
5.4 CITY-ST-ZIP	Coconut Creek, FL 33066	
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 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 charged, or on an attachment with an address.

SIGNATURE: *Betty Russo* Betty Russo 1/29/96 (951) 968-2527
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (12/95)