

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 # 731738 (1)

1. Corporation Name
KINGS CREEK VILLAS ASSOCIATION, INC.



Principal Place of Business: 8585-A SW 80TH PL, MIAMI FL 33143, US
Mailing Address: 8585-A SW 80TH PL, MIAMI FL 33143, US

3. Date Incorporated or Qualified: 01/24/1975
3a. Date of Last Report: 02/27/1995

2. Principal Place of Business (21-24) and 2a. Mailing Address (25-30) fields for Suite, City, State, Zip, and Country.

4. FEI Number: 59-1648913
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
**KARO, WILLIAM H.
8500 S.W. 80TH PLACE
MIAMI FL 33143**

10. Name and Address of New Registered Agent (81-85) fields for Name, Street Address, City, State, and 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	TD	1.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	MARTINEZ, SERGIO	1.2 NAME	
STREET ADDRESS	8520 S W 80TH PLACE	1.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI, FL 00000	1.4 CITY-ST-ZIP	33143
TITLE	PD	2.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	KARO, WILLIAM H	2.2 NAME	
STREET ADDRESS	8500 S W 80TH PLACE	2.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI, FL 00000	2.4 CITY-ST-ZIP	33143
TITLE	D	3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LOPEZ, ELIO	3.2 NAME	LOPEZ, NORA
STREET ADDRESS	8435 S W 80TH PLACE	3.3 STREET ADDRESS	8435 SW 80 PLACE
CITY-ST-ZIP	MIAMI, FL 00000	3.4 CITY-ST-ZIP	MIAMI FL 33143
TITLE	VD	4.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WILLIAMS, DONALD	4.2 NAME	WILLIAM RICHARDSON
STREET ADDRESS	8405 SW 80TH PLACE	4.3 STREET ADDRESS	8440 SW 80 PLACE
CITY-ST-ZIP	MIAMI FL	4.4 CITY-ST-ZIP	MIAMI FL 33143
TITLE	D	5.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RICHARDSON, WILLIAM	5.2 NAME	LEO BLAIR
STREET ADDRESS	8440 SW 80TH PLACE	5.3 STREET ADDRESS	8535 SW 80 PLACE
CITY-ST-ZIP	MIAMI FL	5.4 CITY-ST-ZIP	MIAMI FL 33143
TITLE	S	6.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ASHTON, DAVID	6.2 NAME	PHYLLIS TANNEN
STREET ADDRESS	8540 SW 80TH PLACE	6.3 STREET ADDRESS	8445 SW 80 PLACE
CITY-ST-ZIP	MIAMI FL	6.4 CITY-ST-ZIP	MIAMI FL 33143

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: *William H. Karo* 2/27/96 305-379-7667
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR: WILLIAM H. KARO PRES. Daytime Phone #

CR2E037 (12/95)