

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 # 733130 (9)

1. Corporation Name
KAPOK MANOR CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business: 2697-B SUNSET POINT ROAD CLEARWATER FL 34619
Mailing Address: 2697-B SUNSET POINT ROAD CLEARWATER FL 34619

3. Date Incorporated or Qualified: 06/20/1975
3a. Date of Last Report: 04/28/1995
4. FEI Number: 59-1638712
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 (21-24) and 2a. Mailing Address (25-30) fields with sub-headers for Suite, Apt. #, etc., City & State, Zip, and Country.

9. Name and Address of Current Registered Agent: WILLIAM J NASSER, PROPERTY MANAGER, 2697-B SUNSET POINT ROAD, CLEARWATER FL 34619
10. Name and Address of New Registered Agent (81-85) fields for Name, Street Address, City, 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	PD DAVIS, PATRICK A. 1219 MCMULLEN BOOTH RD CLEARWATER, FL 00000	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	VD MILLER, PURSE 1275 MCMULLEN BOOTH RD CLEARWATER, FL 00000	2.1 TITLE	Director <input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE	TD DAVIS, PHYLLIS 1211 MCMULLEN BOOTH RD. CLEARWATER, FL 00000	2.2 NAME	Werner, Thomas
TITLE	D HUNTER, REASE 1125 MCMULLEN BOOTH RD CLEARWATER FL	2.3 STREET ADDRESS	3804 North B Street
TITLE	S DEUEL, VELMA 1241 MCMULLEN BOOTH RD. CLEARWATER FL	2.4 CITY - ST - ZIP	Tampa, FL 33609
TITLE		3.1 TITLE	Church Treasurer <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE		3.2 NAME	Davis, Phyllis
TITLE		3.3 STREET ADDRESS	
TITLE		3.4 CITY - ST - ZIP	
TITLE		4.1 TITLE	Vice-President <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE		4.2 NAME	Hunter, Rease
TITLE		4.3 STREET ADDRESS	1225 McMullen Booth Road
TITLE		4.4 CITY - ST - ZIP	Clearwater, FL 34619
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE		5.2 NAME	
TITLE		5.3 STREET ADDRESS	
TITLE		5.4 CITY - ST - ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE		6.2 NAME	
TITLE		6.3 STREET ADDRESS	
TITLE		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: *[Signature]* 4/23/96 813 799-0079
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (12/95)