

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 APR 27 AM 8:59

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 735066 (3)

1. Corporation Name

PHEASANT WALK HOMEOWNERS' ASSOCIATION, INC.

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 02/26/1976	3a. Date of Last Report 05/01/1994
4. FEI Number 59-1821382	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status <input type="checkbox"/>	\$68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

Principal Place of Business		Mailing Address	
17718 RAIN TREE TERR. BOCA RATON FL 33487-2264		P.O. BOX 810142 BOCA RATON FL 33481-0142	
2. Principal Place of Business	2a. Mailing Address	21	26
Suite, Apt. #, etc.	Suite, Apt. #, etc.	22	27
City & State	City & State	23	28
Zip	Country	24	30
25	29		

9. Name and Address of Current Registered Agent

BOTLEY, SHARON
4780 BRANDYWINE DRIVE
BOCA RATON FL 33487

10. Name and Address of New Registered Agent

81 Name	VROMAN, WILLIAM
82 Street Address (P.O. Box Number is Not Acceptable)	4913 BRANDYWINE DRIVE
83	1
84 City	BOCA RATON
85 Zip Code	FL 33487

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE: *William Vroman* WILLIAM VROMAN, PRESIDENT DATE: 4/18/95

12. OFFICERS AND DIRECTORS

TITLE	BB VICE PRESIDENT-DIRECTOR
NAME	BOTLEY, SHARON
STREET ADDRESS	4780 BRANDYWINE DRIVE
CITY-ST-ZIP	BOCA RATON FL 33487
TITLE	VA PRESIDENT-DIRECTOR
NAME	VROMAN, WILLIAM
STREET ADDRESS	4913 BRANDYWINE DRIVE
CITY-ST-ZIP	BOCA RATON FL 33487
TITLE	TD
NAME	HOOVER, BRENT
STREET ADDRESS	17381 SPRING TREE LANE
CITY-ST-ZIP	BOCA RATON FL 33487
TITLE	SB
NAME	SILVER, SUSAN
STREET ADDRESS	17734 PINE NEEDLE TERRACE
CITY-ST-ZIP	BOCA RATON FL 33487
TITLE	D
NAME	EVERS, JOHN
STREET ADDRESS	4756 FOX HUNT TRAIL
CITY-ST-ZIP	BOCA RATON FL 33487
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	VICE PRESIDENT-DIRECTOR	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY-ST-ZIP		
2.1 TITLE	PRESIDENT-DIRECTOR	<input checked="" 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	SECRETARY-DIRECTOR	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	RAYMOND KELLY	
4.3 STREET ADDRESS	4399 BRANDYWINE DR	
4.4 CITY-ST-ZIP	BOCA RATON FL 33487	
5.1 TITLE	DIRECTOR	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	IRA MEYERS	
5.3 STREET ADDRESS	17641 LAKE PARK RD	
5.4 CITY-ST-ZIP	BOCA RATON FL 33487	
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 110.07(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: *Raymond Kelly* DATE: 4/18/95 407-994-6356

RAYMOND KELLY, SECRETARY