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Mar 04 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE
Sandra D. Mofitt
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 735097 (8)
1. Corporation Name
VILLAS OF SHERIDAN CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business: 2550 2520 N. 38TH AVENUE HOLLYWOOD FL 33021 US
Mailing Address: 2530 2522 N. 38TH AVENUE HOLLYWOOD FL 33021-1356 US

3. Date Incorporated or Qualified: 02/26/1976
3a. Date of Last Report: 02/20/1996

2. Principal Place of Business: 21 Villas of Sheridan, Suite, Apt. #, etc. Club House, City & State: Hollywood FL, Zip: 33021, Country: Broward
2a. Mailing Address: 26 2530 91.38 ave, Suite, Apt. #, etc., City & State: Hollywood FL, Zip: 33021, Country: Broward

4. FEI Number: 59-1690491 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

9. Name and Address of Current Registered Agent: SHOCHAT, JONATHAN 3915 SHERIDAN STREET HOLLYWOOD FL 33021

10. Name and Address of New Registered Agent: 81 Name, 82 Street Address, 83, 84 City, 85 Zip Code: FL

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: Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS	
TITLE: DP	SHOCHAT, JONATHAN Pres: D.
STREET ADDRESS: 3915 SHERIDAN STREET	
CITY-ST-ZIP: HOLLYWOOD FL	
TITLE: DV	SELINGER, CRAIG
STREET ADDRESS: 2556 N 38TH AVENUE	
CITY-ST-ZIP: HOLLYWOOD FL	
TITLE: DS	SHOCHAT, RUTH secy: D.
STREET ADDRESS: 3915 SHERIDAN STREET	
CITY-ST-ZIP: HOLLYWOOD FL	
TITLE: DT	LANCE, EVELYN Treas: D.
STREET ADDRESS: 2530 N 38TH AVENUE	
CITY-ST-ZIP: HOLLYWOOD FL	
TITLE: D	CASMAS, DANIEL
STREET ADDRESS: 2550 N 38TH AVENUE	
CITY-ST-ZIP: HOLLYWOOD FL	
TITLE: [] DELETE	
NAME: [] DELETE	
STREET ADDRESS: [] DELETE	
CITY-ST-ZIP: [] DELETE	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	[] Change [] Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	Steve TAMMUN D. Change Addition
2.2 NAME	2542 N. 38 ave D. V. Pres!
2.3 STREET ADDRESS	Hollywood FL. 33021
2.4 CITY-ST-ZIP	
3.1 TITLE	[] Change [] Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	[] Change [] Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	[] Change [] Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	[] Change [] 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 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: Treas: D. [Signature] 1/29/97 954-964-1299
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone # 0021620

CR2E037 (9/96)