

FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **736616 (4)**
1. Corporation Name

STIRRUP KEY HOMEOWNERS ASSOCIATION, INC.



Principal Place of Business Mailing Address
**121 WINDY POINT CIR.
MARATHON FL 33050
US**

3. Date Incorporated or Qualified **08/18/1976** 3a. Date of Last Report **05/01/1995**

2. Principal Place of Business 2a. Mailing Address

21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.

22 City & State 27 City & State

23 Zip Country 28 Zip Country

24 25 29 30

4. FEI Number **59-2502836** 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
**MILLS, WILLIAM T.
347 STIRRUP KEY BLVD
MARATHON FL 33050**

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 signature required when re-appointing) DATE _____

12. OFFICERS AND DIRECTORS	
TITLE	D <input checked="" type="checkbox"/> DELETE
NAME	MILLS, WILLIAM T.
STREET ADDRESS	347 STIRRUP KEY BLVD
CITY-ST-ZIP	MARATHON FL
TITLE	VD <input type="checkbox"/> DELETE
NAME	BOE, GLEN
STREET ADDRESS	318 STIRRUP KEY BLVD.
CITY-ST-ZIP	MARATHON, FL 00000
TITLE	D <input checked="" type="checkbox"/> DELETE
NAME	LAURICELLA, JAY
STREET ADDRESS	338 STIRRUP KEY BLVD.
CITY-ST-ZIP	MARATHON FL
TITLE	P <input type="checkbox"/> DELETE
NAME	KREH, HENRY
STREET ADDRESS	108 SUNSET DR.
CITY-ST-ZIP	MARATHON FL
TITLE	P <input type="checkbox"/> DELETE
NAME	SHINN, GERALD
STREET ADDRESS	318 STIRRUP KEY BLVD
CITY-ST-ZIP	MARATHON, FL 33050
TITLE	SIT D <input type="checkbox"/> DELETE
NAME	TEMPLE, JOAN
STREET ADDRESS	121 WINDY POINT CIRCLE
CITY-ST-ZIP	MARATHON 33050

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	VD <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	STYER, TOM
1.3 STREET ADDRESS	124 PIRATES COVE DRIVE
1.4 CITY-ST-ZIP	MARATHON 33050
2.1 TITLE	D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	BOE, GLEN
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	DUNSTANE, VERNE
3.3 STREET ADDRESS	105 PIRATES COVE DRIVE
3.4 CITY-ST-ZIP	MARATHON 33050
4.1 TITLE	D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	KREH, HENRY
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
5.2 NAME	LOMBARD, MARY
5.3 STREET ADDRESS	314 STIRRUP KEY BLVD
5.4 CITY-ST-ZIP	MARATHON 33050
6.1 TITLE	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
6.2 NAME	SCHINDLER, GAIL
6.3 STREET ADDRESS	378 STIRRUP KEY BLVD
6.4 CITY-ST-ZIP	MARATHON 33050

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: Joan P Temple, Secretary/Treasurer 3/12/96 (305) 743-5749
DATE: _____

CR2E037 (12/95)

736616

ADDITION

D

ZARNOTI, MAGDA
366 STIRRUP KEY BLVD
MARATHON 33050