

FILE NOW: FILING FEE IS \$61.25

FILED
May 09 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 739901 (7)
 1. Corporation Name
CASA PRIMA APARTMENTS ASSOCIATION, INC.



Principal Place of Business 9190 OAKHURST RD., SUITE 2A SEMINOLE FL 34646	Mailing Address 9190 OAKHURST RD., SUITE 2A SEMINOLE FL 33776-2159
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2. Principal Place of Business 21	2a. Mailing Address 26	4. FEI Number 59-1892891	3a. Date of Last Report 04/22/1996
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27	Applied For Not Applicable	3. Date Incorporated or Qualified 08/15/1977
City & State 23	City & State 28	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
Zip 24	Country 25	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
		7. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
CICCO, ROBERT A. 9190 OAKHURST RD., SUITE 2A SEMINOLE FL 34646		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 reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DP <input type="checkbox"/> DELETE	1.1 TITLE	DVP <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WRIGHT, FREDDIE	1.2 NAME	WRIGHT, FREDDIE
STREET ADDRESS	1215 SO. ORANGE AVENUE	1.3 STREET ADDRESS	1215 S. Orange Avenue
CITY-ST-ZIP	BARTOW FL	1.4 CITY-ST-ZIP	Bartow, FL 33830
TITLE	DV <input type="checkbox"/> DELETE	2.1 TITLE	DST <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WRIGHT, O. H.	2.2 NAME	WRIGHT, O.H.
STREET ADDRESS	1215 SO. ORANGE AVENUE	2.3 STREET ADDRESS	1215 S. Orange Avenue
CITY-ST-ZIP	BARTOW, FL 0	2.4 CITY-ST-ZIP	Bartow, FL 33830
TITLE	DST <input type="checkbox"/> DELETE	3.1 TITLE	DP <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FERGUSON, MARGARET	3.2 NAME	FERGUSON, MARGARET
STREET ADDRESS	1859 SHORE DR S	3.3 STREET ADDRESS	1859 Shore Dr. S.
CITY-ST-ZIP	SO. PASADENA FL	3.4 CITY-ST-ZIP	So. Pasadena, FL 33707
TITLE	D <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HERWIG, ALAN	4.2 NAME	
STREET ADDRESS	52 REDOWING RD	4.3 STREET ADDRESS	
CITY-ST-ZIP	PERKASIE PA	4.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MORTEEN, JAMES	5.2 NAME	
STREET ADDRESS	12350 U.S. 19 S.	5.3 STREET ADDRESS	
CITY-ST-ZIP	CLEARWATER FL	5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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: _____ April 25, 1997

CR2E037 (9/96)