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 -6 AM 6:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 739918 (1)

1. Corporation Name
MAR VISTA CONDOMINIUM, INC.

Principal Place of Business	Mailing Address
1000 E. CAMINO REAL #2B BOCA RATON FL 33432	1000 E. CAMINO REAL #2B BOCA RATON FL 33432

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 08/16/1977
3a. Date of Last Report: 03/22/1994
4. FEI Number: 06-1073979 ☐ 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
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ **$68.75** Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☑ Yes ☐ No

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 / Country 25	Zip 29 / Country 30

9. Name and Address of Current Registered Agent

COYNER, RANDOLPH S.
1000 CAMINO REAL
UNIT 2B
BOCA RATON FL 33432

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 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: Randolph S. Coyner — 3/31/95
(Signature, typed or printed name of registered agent and title if applicable. NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	1.1 TITLE	D&VP	☑ Change ☐ Addition
NAME	MCGONIGLE, LAWRENCE	1.2 NAME		
STREET ADDRESS	1000 E CAMINO REAL	1.3 STREET ADDRESS	UNIT 2A	
CITY-ST-ZIP	BOCA RATON, FL 00000	1.4 CITY-ST-ZIP	33432	
TITLE	V	2.1 TITLE	D	☑ Change ☐ Addition
NAME	PACELLI, JOE	2.2 NAME		
STREET ADDRESS	1000 E CAMINO REAL	2.3 STREET ADDRESS	UNIT 1A	
CITY-ST-ZIP	BOCA RATON, FL 00000	2.4 CITY-ST-ZIP	33432	
TITLE	SD	3.1 TITLE		☑ Change ☐ Addition
NAME	DAWSON, DIANA	3.2 NAME		
STREET ADDRESS	1000 E CAMINO REAL	3.3 STREET ADDRESS	UNIT 2B	
CITY-ST-ZIP	BOCA RATON FL	3.4 CITY-ST-ZIP	33432	
TITLE	TD	4.1 TITLE	T	☑ Change ☐ Addition
NAME	COYNER, RANDOLPH	4.2 NAME		
STREET ADDRESS	1000 E. CAMINO REAL	4.3 STREET ADDRESS	UNIT 2B	
CITY-ST-ZIP	BOCA RATON FL	4.4 CITY-ST-ZIP	33432	
TITLE	[redacted]	5.1 TITLE	P	☐ Change ☑ Addition
NAME		5.2 NAME	A, BILLIE FEHER	
STREET ADDRESS		5.3 STREET ADDRESS	1000 E. CAMINO REAL UNIT 1B	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	BOCA RATON, FL 33432	
TITLE		6.1 TITLE		☐ Change ☐ 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 is voluntarily furnished and 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: Randolph S. Coyner — RANDOLPH S. COYNER — 3/31/95 — (407) 362-5441
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0048448