

FILE NOW: FILING FEE IS \$61.25

FILED

Apr 24 1997 8:00am
Secretary of State

NONPROFIT CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # 744278 (3)

1. Corporation Name

325 FERNWOOD CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business

Mailing Address

C/O RICHARD VERNON
325 FERNWOOD ROAD
KEY BISCAIYNE FL 33149

C/O RICHARD VERNON
325 FERNWOOD ROAD
KEY BISCAIYNE FL 33149-1332

3. Date Incorporated or Qualified
09/14/1978

3a. Date of Last Report
04/26/1996

2. Principal Place of Business

2a. Mailing Address

4. FEI Number
59-1938787

Applied For
 Not Applicable

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

5. Certificate of Status Desired

\$8.75 Additional Fee Required

22 City & State

27 City & State

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

23

28

24 Zip

Country

29 Zip

Country

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

VERNON, RICHARD
325 FERNWOOD ROAD
KEY BISCAIYNE FL 33149

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

Richard Vernon / *Richard Vernon* / PRESIDENT April 16, 1997

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

T DELETE
NAME: STONE, EDWARD H.
STREET ADDRESS: 145 HAMPTON LANE
CITY-ST-ZIP: KEY BISCAIYNE FL

1.1 TITLE Change Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

VP DELETE
NAME: SPAULDING, LYNN
STREET ADDRESS: 2451 BRICKELL AVE
CITY-ST-ZIP: MIAMI FL

2.1 TITLE Change Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

PD DELETE
NAME: VERNON, RICHARD
STREET ADDRESS: 609 OCEAN DR APT 10H
CITY-ST-ZIP: KEY BISCAIYNE FL

3.1 TITLE Change Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

SD DELETE
NAME: SCANELL, MARY
STREET ADDRESS: 220 WOOD CREST RD
CITY-ST-ZIP: KEY BISCAIYNE FL

4.1 TITLE Change Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

D DELETE
NAME: MACKLIN, ROBERT
STREET ADDRESS: 290 GLENRIDGE ROAD
CITY-ST-ZIP: KEY BISCAIYNE FL

5.1 TITLE Change Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

DELETE
NAME:
STREET ADDRESS:
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 817, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

MARY A. SCANELL / *Mary A. Scanell* 4/16/97

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

Daytime Phone # 0030751

CP2E037 (9/96)