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FILED
May 19 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 # 746858 (0)
1. Corporation Name
NORMANDY J ASSOCIATION, INC.



Principal Place of Business Mailing Address

PRIME MANAGEMENT GROUP, INC.
~~1061 SOUTH ROGERS CIRCLE~~
BOCA RATON FL 33487

PRIME MANAGEMENT GROUP, INC.
~~1061 SOUTH ROGERS CIRCLE~~
BOCA RATON FL 33487-2616

2. Principal Place of Business 2a. Mailing Address

21 Suite, Apt. #, etc.

22 City & State

23 Zip

24 25 29 30

6300 Park of Commerce Blvd
PRIME MGMT. GROUP, INC.
6300 PRK. OF COMMERCE BLVD
BOCA RATON, FL. 33487

3. Date Incorporated or Qualified 04/23/1979 3a. Date of Last Report 05/01/1996

4. FEI Number 59-1953437 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

RAIBLE, RONALD
1051 S. ROGERS CIR.
BOCA RATON FL 33487

10. Name and Address of New Registered Agent

81 Name
82 Street A
83
84 City

SWATT, MYRON
6300 PK OF COMMERCE BLVD
BOCA RATON, FL 33487

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 _____ DATE 3/18/97

(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE	P	<input type="checkbox"/> DELETE
NAME	WEINBERG, SAMUEL	
STREET ADDRESS	KINGS PT. NORMANDY J 438	
CITY-ST-ZIP	DELRAY BEACH FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	NUREMBERG, IRVING	
STREET ADDRESS	473 NORMANDY J	
CITY-ST-ZIP	DELRAY BCH FL	
TITLE	ST	<input type="checkbox"/> DELETE
NAME	MONK, LENORE	
STREET ADDRESS	KINGS PT. NORMANDY J 454	
CITY-ST-ZIP	DELRAY BEACH FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	KALTER, AL	
STREET ADDRESS	NORMANDY J 461	
CITY-ST-ZIP	DELRAY BEACH FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	MILLSTEIN, HELEN	
STREET ADDRESS	452 NROMANDY J	
CITY-ST-ZIP	DELRAY BCH FL	
TITLE	A	<input type="checkbox"/> DELETE
NAME	RAIBLE, RONALD	
STREET ADDRESS	6300 PARK OF COMMERCE BLVD	
CITY-ST-ZIP	BOCA RATON FL 33487	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> 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: _____ DATE 3/18/97 DAYTIME PHONE 561-499-7484

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E037 (9/96)