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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 MAR 20 PM 2:18

DOCUMENT # 747381 (2)

1. Corporation Name

COMMODORE PLACE CONDOMINIUM, INC.

Principal Place of Business	Mailing Address
1902 HONOUR RD. ORLANDO FL 32839-1505	1902 HONOUR RD. ORLANDO FL 32839-1505

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 05/25/1979
3a. Date of Last Report: 01/21/1994
4. FEI Number: 59-2010269 ☐ 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

REID, VIRGINIA
1902 HONOUR RD.
ORLANDO FL 32809

10. Name and Address of New Registered Agent

31 Name
32 Street Address (P.O. Box Number is Not Acceptable)
33
34 City FL 35 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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	T	1.1 TITLE	T ☐ Change ☐ Addition
NAME	LUCRO, KENNETH R.	1.2 NAME	DAN DRUMMOND
STREET ADDRESS	1926-1 HONOUR ROAD	1.3 STREET ADDRESS	540 MANDALAY RD.
CITY-ST-ZIP	ORLANDO FL	1.4 CITY-ST-ZIP	ORLANDO, FL 32809
TITLE	D	2.1 TITLE	D ☐ Change ☐ Addition
NAME	GERBER, RANDAL	2.2 NAME	HENRY ALIBERTI
STREET ADDRESS	1902-21 HONOUR ROAD	2.3 STREET ADDRESS	1902-34 HONOUR RD.
CITY-ST-ZIP	ORLANDO FL	2.4 CITY-ST-ZIP	ORLANDO, FL 32838
TITLE	D	3.1 TITLE	V ☐ Change ☐ Addition
NAME	COHEN, SYLVIA	3.2 NAME	SYLVIA COHEN
STREET ADDRESS	1916-1 HONOUR RD	3.3 STREET ADDRESS	1916-1 HONOUR RD.
CITY-ST-ZIP	ORLANDO FL	3.4 CITY-ST-ZIP	ORLANDO, FL 32839
TITLE	D	4.1 TITLE	D ☐ Change ☐ Addition
NAME	HILDRETH, LEONIE	4.2 NAME	LEONIE HILDRETH
STREET ADDRESS	1900-19 HONOUR ROAD	4.3 STREET ADDRESS	1902-8 HONOUR RD.
CITY-ST-ZIP	ORLANDO FL	4.4 CITY-ST-ZIP	ORLANDO, FL 32839
TITLE	VS	5.1 TITLE	S ☐ Change ☐ Addition
NAME	REXROAT, JAMES	5.2 NAME	JAMES REXROAT
STREET ADDRESS	1213 OREGON ST	5.3 STREET ADDRESS	1213 OREGON ST.
CITY-ST-ZIP	ORLANDO FL	5.4 CITY-ST-ZIP	ORLANDO, FL 32803
TITLE	P	6.1 TITLE	P ☐ Change ☐ Addition
NAME	MARTINEZ, NEPHTALI	6.2 NAME	NEPHTALI MARTINEZ
STREET ADDRESS	501 S EOLA DR	6.3 STREET ADDRESS	1813 TOWNHALL LANE
CITY-ST-ZIP	ORLANDO FL	6.4 CITY-ST-ZIP	ORLANDO, FL 32807

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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: _____ Dan Drummond 3-1-95 407 857 5978
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0034710