

FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # 750818 (7)
1. Corporation Name

POLO ISLAND CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business: 5295 TOWN CTR RD STE 200 BOCA RATON FL 33486
Mailing Address: 5295 TOWN CTR RD STE 200 BOCA RATON FL 33486

3. Date Incorporated or Qualified: 01/29/1980
3a. Date of Last Report: 04/25/1995
4. FEI Number: 59-1970904
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

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

ISAACSON, WILLIAM K
% LANG MANAGEMENT COMPANY INC
5295 TOWN CTR RD STE 200
BOCA RATON FL 33486

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code: FL

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

TITLE	PD	<input type="checkbox"/> DELETE
NAME	WHEELER, KENNETH	
STREET ADDRESS	2735 POLO ISLAND K-104	
CITY-ST-ZIP	WEST PALM BEACH FL	
TITLE	VD	<input type="checkbox"/> DELETE
NAME	BANE, DAVID	
STREET ADDRESS	2835 POLO ISLAND H-103	
CITY-ST-ZIP	WEST PALM BEACH FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	GREENE, JUDY	
STREET ADDRESS	2835 POLO ISLAND DR H101	
CITY-ST-ZIP	WEST PALM BEACH FL	
TITLE	TD	<input type="checkbox"/> DELETE
NAME	BAENZIGER, COLIN	
STREET ADDRESS	2730 POLO ISLAND DR A202	
CITY-ST-ZIP	WEST PALM BEACH FL	
TITLE	SD	<input type="checkbox"/> DELETE
NAME	LACY, ROBERT	
STREET ADDRESS	2835 POLO ISLAND, H104	
CITY-ST-ZIP	WEST PALM BCH FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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 is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: *David M. Bane*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR: David M. Bane
Date: _____ Daytime Phone #: _____

CR2E037 (12/95)