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May 15 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997



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

DOCUMENT # 752444 (0)
1. Corporation Name
CROSS CREEK CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business: 1500 N CONGRESS AVE. WEST PALM BEACH FL 33401
Mailing Address: 1500 N CONGRESS AVE. WEST PALM BEACH FL 33401-1717

3. Date Incorporated or Qualified: 05/13/1980
3a. Date of Last Report: 04/29/1996
4. FEI Number: 59-2041142
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 (21-24) and 2a. Mailing Address (26-30) fields for Suite, Apt #, etc., City & State, Zip, and Country.

9. Name and Address of Current Registered Agent
ISAAC B. STEIN
1500 N. CONGRESS AVE
WEST PALM BEACH FL 33401

10. Name and Address of New Registered Agent (81-85) fields for Name, Street Address, City, State (FL), and 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 obligation of, Section 617.0503, Florida Statutes.
SIGNATURE: Isaac B. Stein
Date: 5/1/97

12. OFFICERS AND DIRECTORS

TITLE	PD	<input checked="" type="checkbox"/> DELETE
NAME	LEE, DAVIS C	
STREET ADDRESS	1500 N CONGRESS AVE	
CITY-ST-ZIP	W PALM BEACH FL	
TITLE	VPD	<input type="checkbox"/> DELETE
NAME	KENNETH, KEITH	
STREET ADDRESS	1500 N CONGRESS AVE	
CITY-ST-ZIP	W PALM BEACH FL	
TITLE	SD	<input checked="" type="checkbox"/> DELETE
NAME	KELLY, YVONNE	
STREET ADDRESS	1500 N CONGRESS AVE	
CITY-ST-ZIP	W PALM BEACH FL	
TITLE	TD	<input checked="" type="checkbox"/> DELETE
NAME	HUMPHREY, MALCOLM	
STREET ADDRESS	1500 N CONGRESS AVE	
CITY-ST-ZIP	W PALM BEACH FL	
TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	ESTERBY, PATRICIA	
STREET ADDRESS	1500 N. CONGRESS AVE.	
CITY-ST-ZIP	W PALM BEACH FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	PD	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	KELLY, YVONNE	
1.3 STREET ADDRESS	1500 N. CONGRESS AVE W. PALM BEACH FL 33401	
1.4 CITY-ST-ZIP	FL 33401	
2.1 TITLE	VICE PRES.	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	KEVIN KENNEY	
2.3 STREET ADDRESS	1032 JUDITH ST. PETERSBURG, VA 26102	
2.4 CITY-ST-ZIP	VA 26102	
3.1 TITLE	SD	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	ESTERBY, PATRICIA	
3.3 STREET ADDRESS	1500 N. CONGRESS AVE WEST PALM BEACH, FL 33401	
3.4 CITY-ST-ZIP	FL 33401	
4.1 TITLE	TD	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	FREEDMAN, RICHARD	
4.3 STREET ADDRESS	P.O. BOX 3223 PALM BEACH FL 33480	
4.4 CITY-ST-ZIP	FL 33480	
5.1 TITLE	D	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	VOYLES, ROBERT	
5.3 STREET ADDRESS	1500 N. CONGRESS AVE WEST PALM BEACH, FL 33401	
5.4 CITY-ST-ZIP	FL 33401	
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: Patricia Esterby
Date: 4-8-97
Daytime Phone # 0038193

CR2E037 (9/96)