

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 # 755666 (5)

1. Corporation Name

JACARANDA COUNTRY CLUB VILLAS CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business

Mailing Address

C/O KEYS-CALDWELL PROPERTY MGT.
250 W TAMPA AVE
VENICE FL 34285

C/O KEYS-CALDWELL PROPERTY MGT.
250 W TAMPA AVE
VENICE FL 34285

3. Date Incorporated or Qualified
12/24/1980

3a. Date of Last Report
04/10/1995

21. Principal Place of Business

2a. Mailing Address

4. FEI Number
59-2274795

Applied For
Not Applicable

22. Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. Certificate of Status Desired \$8.75 Additional Fee Required

23. City & State

City & State

6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees

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

CALDWELL, ANNETTE K.
KEYS-CALDWELL PROPERTY MGT.
250 W TAMPA AVE
VENICE FL 34285

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

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

TITLE: TD DELETE
NAME: VAN NESS, JACK
STREET ADDRESS: 839 COUNTRY CLUB CIR.
CITY-ST-ZIP: VENICE FL

1.1 TITLE: V/D Change Addition
1.2 NAME: DOROTHY CARLSON
1.3 STREET ADDRESS: 817 COUNTRY CLUB CIRCLE
1.4 CITY-ST-ZIP: VENICE FL

TITLE: D DELETE
NAME: HARTMAN, CY
STREET ADDRESS: 829 COUNTRY CLUB CIR.
CITY-ST-ZIP: VENICE FL

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

TITLE: PD DELETE
NAME: BYRNES, WILLIAM
STREET ADDRESS: 826 COUNTRY CLUB CIR.
CITY-ST-ZIP: VENICE FL

3.1 TITLE: T/S/D Change Addition
3.2 NAME: FRANKLIN KAPKE
3.3 STREET ADDRESS: 827 COUNTRY CLUB CIRCLE
3.4 CITY-ST-ZIP: VENICE FL

TITLE: SD DELETE
NAME: GALLIPEAU, DORIS
STREET ADDRESS: 853 COUNTRY CLUB CIR
CITY-ST-ZIP: VENICE FL

4.1 TITLE: D Change Addition
4.2 NAME: LYNN (DICK) EBERT
4.3 STREET ADDRESS: 849 COUNTRY CLUB CIRCLE
4.4 CITY-ST-ZIP: VENICE FL

TITLE: VD DELETE
NAME: GUTOWSKI, JOSEPH
STREET ADDRESS: 847 COUNTRY CLUB CIRCLE
CITY-ST-ZIP: VENICE FL

5.1 TITLE: P/D Change Addition
5.2 NAME:
5.3 STREET ADDRESS:
5.4 CITY-ST-ZIP:

TITLE: 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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/19/96 941-484-6108

CR2E037 (12/95)