

FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # 756435 (4)

1. Corporation Name
SPICEWOOD VILLAGE PROPERTY OWNERS' ASSOCIATION, INC.



Principal Place of Business Mailing Address
**3715 GOLF ROAD
BOYNTON BEACH FL 33436** **3715 GOLF ROAD
BOYNTON BEACH FL 33436**

3. Date Incorporated or Qualified: **02/19/1981** 3a. Date of Last Report: **05/01/1995**

2. Principal Place of Business		2a. Mailing Address	
21		26	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
22		27	
City & State		City & State	
23		28	
Zip	Country	Zip	Country
24	25	29	30

4. FEI Number: **59-2098934** 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

**TENNYSON, ROD
1801 AUSTRALIAN AVE., S
STE 101
W.PALM BCH. FL 33409**

10. Name and Address of New Registered Agent

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 DELETE

TITLE	TS
NAME	TESTA, EDWARD
STREET ADDRESS	10678 SPICEWOOD TRAIL
CITY-ST-ZIP	BOYNTON BCH. FL 00000
TITLE	PD <input checked="" type="checkbox"/> DELETE
NAME	SCHMALZER, ALVIN F.
STREET ADDRESS	10789 SPRICEWOOD TR.
CITY-ST-ZIP	BOYNTON BCH. FL 00000
TITLE	VD <input type="checkbox"/> DELETE
NAME	HECKRODT, FRANK H.
STREET ADDRESS	10918 SPICEWOOD TRAIL
CITY-ST-ZIP	BOYNTON BEACH FL
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	
13 STREET ADDRESS	
14 CITY-ST-ZIP	
21 TITLE	V/D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
22 NAME	SPARLING, GEORGE
23 STREET ADDRESS	10558 SPICEWOOD TRAIL
24 CITY-ST-ZIP	BOYNTON BEACH, FL 33436
31 TITLE	P/D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME	HECKRODT, FRANK
33 STREET ADDRESS	10918 SPICEWOOD TRAIL
34 CITY-ST-ZIP	BOYNTON BEACH, FL 33436
41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME	
43 STREET ADDRESS	
44 CITY-ST-ZIP	
51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME	
53 STREET ADDRESS	
54 CITY-ST-ZIP	
61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME	
63 STREET ADDRESS	
64 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: Frank H. Heckrodt **Frank H. Heckrodt, President** **April 29, 1996** **737-5100**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone Ext. 303

CR2E037 (12/95)