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NONPROFIT CORPORATION ANNUAL REPORT 1996



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

FILED Mar 21 1996 8:00 am Secretary of State

DOCUMENT # 756963 (5)

1. Corporation Name RIVER RUN YACHT CLUB CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business 1700 NW NORTH RIVER DR. BOX 99 MIAMI FL 33125

Mailing Address 1700 NW NORTH RIVER DR. BOX 99 MIAMI FL 33125

3. Date Incorporated or Qualified 03/26/1981 3a. Date of Last Report 02/10/1995

2. Principal Place of Business 21 2a. Mailing Address 26

Suite, Apt. #, etc. 22 27

City & State 23 28

Zip 24 25 Country 29 30

4. FEI Number 59-2218930 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

THEEN, DUNIA G. D. MANAGEMENT, INC. 2001 NW 7 ST. #203 MIAMI FL 33135

10. Name and Address of New Registered Agent

81 Name SUSAN BAKALAR, ESQ. 82 Street Address (P.O. Box Number is Not Acceptable) 1152 N. UNIVERSITY DRIVE 83 SUITE 201 84 City PENBROKE PINES, FL 85 Zip Code 33024

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 617.0603, Florida Statutes.

SIGNATURE [Signature] Susan P. Bakalar, Esquire 3/14/96 (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

Table with 4 columns: TITLE, NAME, STREET ADDRESS, CITY-ST-ZIP. Rows include PD THEEN, HERMAN J; VPD KING, ROBERT A; D BARQUIN, RITA.

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

Table with 4 columns: TITLE, NAME, STREET ADDRESS, CITY-ST-ZIP. Rows include VP/D WILLIAM HEGGMAN; S/D GEORGE DEWEL; TREASURER/DYON MICHAEL HAMMON.

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] 2-12-96 (305) 460-9900 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Day/Time Phone #

CR2E037 (12/95)