

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 # 761069 (4)

1. Corporation Name
OCEANWALK CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business: 5801 NORTH OCEAN BLVD OCEAN RIDGE FL 33435
Mailing Address: 5801 NORTH OCEAN BLVD OCEAN RIDGE FL 33435

3. Date Incorporated or Qualified: 01/11/1982
3a. Date of Last Report: 03/29/1995

21	2. Principal Place of Business	2a	Mailing Address	4.	FEI Number	Applied For
	Suite, Apt. #, etc.		Suite, Apt. #, etc.		59-2185177	Not Applicable
22	City & State	27	City & State	5.	Certificate of Status Desired	\$8.75 Additional Fee Required
	Zip	28	City & State		<input type="checkbox"/>	
23	Country	29	Country	6.	Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
	Country	30	Country		<input type="checkbox"/>	
24	Country	29	Country	8.	This corporation has liability for intangible tax under s. 199.032, Florida Statutes	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

9. Name and Address of Current Registered Agent

ASSOCIATED PROPERTY MANAGEMENT
400 S DIXIE HWY., SUITE 10
LAKE WORTH FL 33460

10. Name and Address of New Registered Agent

81	Name
82	Street Address (P.O. Box Number is Not Acceptable)
83	
84	City
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 _____ DATE _____
Signature, typed or printed name of registered agent and title (if applicable) (NOTE: Registered Agent signature required when resigning)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	Treasurer	11 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CONNORS, WILLIAM	12 NAME	
STREET ADDRESS	5801 N OCEAN BLVD #202	13 STREET ADDRESS	
CITY-ST-ZIP	OCEAN RIDGE FL 33435	14 CITY-ST-ZIP	
TITLE	PD	21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CORALLO, VICTOR	22 NAME	
STREET ADDRESS	5801 N. OCEAN BLVD #106	23 STREET ADDRESS	
CITY-ST-ZIP	OCEAN RIDGE FL 33435	24 CITY-ST-ZIP	
TITLE	VP	31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GREALISH, TOM	32 NAME	
STREET ADDRESS	5801 N. OCEAN BLVD #107	33 STREET ADDRESS	
CITY-ST-ZIP	OCEAN RIDGE FL 33435	34 CITY-ST-ZIP	
TITLE	VICE PRESIDENT	41 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	STEPHENSON, RAY	42 NAME	
STREET ADDRESS	5801 N OCEAN BLVD #103	43 STREET ADDRESS	
CITY-ST-ZIP	OCEAN RIDGE FL 33435	44 CITY-ST-ZIP	
TITLE	SD	51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PARRY, JOHN	52 NAME	
STREET ADDRESS	5801 N OCEAN BLVD #110	53 STREET ADDRESS	
CITY-ST-ZIP	OCEAN RIDGE FL 33435	54 CITY-ST-ZIP	
TITLE		61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY-ST-ZIP		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: *[Signature]* DATE: 2/21/96 (407) 738-5093
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E037 (12/95)