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CORPORATION ANNUAL REPORT



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

1996

SIGNATURE:

FILED Apr 16 1996 8:00 am Secretary of State

DOCUMENT # K41672 (2) 1. Corporation Name RANANA CAY APTS INC					Secretary of State			
BANAI	NA CAY APTS., INC.]			
Principal Place	of Business	Mailing Address						
P.O. BOX 46	64	P.O. BOX 464			}			
	ND MA 01945	MARBLEHEAD MA 01945						
					3. Date Incorporated or Qualified 10/27/1988			st Report /1995
2. Principal Pla	ace of Business	2a. Mailing Address			4. FEI Number	<u> </u>	12121	Applied For
Suite. Apt. #	# oto	26			59-2920656			Not Applica
Scille, Apr. #	r, etc.	Suite, Apt. #, etc.	,		5. Certificate of Status Desired			.75 Additiona
City & State		City & State			6. Election Campaign Financing	-		ee Required
3		28			Trust Fund Contribution			.00 May Be
Zip	Country	Zip	Country	у	8. This corporation has liability for			
4	25 9. Name and Address of Current	29 Registered Agent	30			s No		
		Tradition right	81	Name	10. Name and Address of New	Registerea	Agent	······································
TOMPKI	INS, THOMAS N.		82	Ctract And	dress (P.O. Box Number is Not Accepta			<u></u>
	DGGY CREEK ROAD		<u></u>	Street Nov	ress (M.O. Box Number is Not Accept	able)		
KISSIMA	MEE FL 34744		83					
			84	City			85	Zip Code
							163	•
11. Pursuant to or registere familiar with	o the provisions of Sections 607.0502 a ad agent, or both, in the State of Florida h, and accept the obligations of, Section	and 607.1508, Florida Sta 3. Such change was author 1. 607.0505, Florida Statu	itutes, the above- prized by the corp	named corpo coration's boa	oration submits this statement for the p ard of directors. I hereby accept the ap	urpose of cha pointment as	nging registe	ts registered of red agent. I am
SIGNATURE	the provisions of Sections 607.0502 a ad agent, or both, in the State of Florida h, and accept the obligations of, Section Signature, typed or printed name of registeric agent an OFFICERS AND	nd title if applicable	atutes, the above- orized by the corp rites. (NOTE: Registered Agent		ed when reinstalling)	DATE		
SIGNATURE.	Signature, typed or printed name of registered again an OFFICERS AND I	nd title if applicable	(NOTE: Registered Ager			DATE FICERS AND		TORS IN 12
SIGNATURE. \$ 12. IIILE NAME	OFFICERS AND I DP REEBENACKER, NOEL J.	nd title if applicable DIRECTORS	(NOTE: Registered Ager		ed when reinstalling)	DATE FICERS AND	DIREC	TORS IN 12
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