

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 APR -5 PM 2:41

DOCUMENT # **N01074 (6)**

1. Corporation Name

ENCANTADA HOMEOWNERS' ASSOCIATION, INC.

Principal Place of Business

Mailing Address

C/O PRIME MANAGEMENT GROUP INC.
1015 S. ROGERS CIRCLE
BOCA RATON FL 33487
US

C/O PRIME MANAGEMENT GROUP INC.
1051 S. ROGERS CIRCLE
BOCA RATON FL 33487
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 01/24/1984	3a. Date of Last Report 03/24/1994
4. FEI Number 59-2245342	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status <input type="checkbox"/>	\$68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

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
24	25
29	30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

IRVING, JUNE M.
C/O PRIME MANAGEMENT GROUP, INC.
1015 S. ROGERS CIRCLE
BOCA RATON FL 33487

81 Name MYRON SWATT
82 Street Address (P.O. Box Number is Not Acceptable) 60 PRIME MANAGEMENT GROUP
83 1051 S. ROGERS CIRCLE
84 City Boca Raton
85 Zip Code FL 33487

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE

[Signature]

3/22/95
DATE

12. OFFICERS AND DIRECTORS

TITLE VPD	NAME TRINN, MAX	STREET ADDRESS 7270 SIDONIA CT.	CITY - ST - ZIP BOCA RATON FL
TITLE TD	NAME HABERMAN, BARRY	STREET ADDRESS 7120 MARIANA CT.	CITY - ST - ZIP BOCA RATON FL
TITLE VPD	NAME SAVAGE, MYRA	STREET ADDRESS 7220 MONTRICO DR.	CITY - ST - ZIP BOCA RATON FL
TITLE PD	NAME CHEMNOWSKY, ALAN	STREET ADDRESS 7136 MONTRICO DR.	CITY - ST - ZIP BOCA RATON FL
TITLE SD	NAME RUBENSTEIN, MARILYN	STREET ADDRESS 7118 MONTRICO DR.	CITY - ST - ZIP BOCA RATON FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PD	NAME CANNON, HERBERT	STREET ADDRESS 23402 SAVONA COURT	CITY - ST - ZIP BOCA RATON, FL 33433	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.1 TITLE	NAME HABERMAN, BARRY J.	STREET ADDRESS	CITY - ST - ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.1 TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.1 TITLE VPD	NAME PEPPER, RONALD	STREET ADDRESS 7058 MONTRICO DRIVE	CITY - ST - ZIP BOCA RATON, FL 33433	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
5.1 TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.1 TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 110.07(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]* **DORRY J. HABERMAN** 3/22/95 (407) 395 9311
[Signature] **MARILYN RUBENSTEIN** 3/24/95 (407) 394 5346