

FILE NOW: FILING FEE IS \$61.25

FILED

Feb 19 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N01075 (3)
 1. Corporation Name
MARINE TERRACE CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business 1018 NO. ATLANTIC AVENUE DAYTONA BEACH FL 32118-3627	Mailing Address 1018 NO. ATLANTIC AVENUE DAYTONA BEACH FL 32118-3627
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3. Date Incorporated or Qualified 01/24/1984	3a. Date of Last Report 04/09/1996
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2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country
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4. FEI Number 59-2860553	Applied For <input type="checkbox"/> 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
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent
**FEROLIE, LAWRENCE
807 FLAMINGO DRIVE
HOLLY HILL FL 32117**

10. Name and Address of New Registered Agent
81 Name
Lewis A. Parissi
82 Street Address (P.O. Box Number is Not Acceptable)
1074 E. French Ave.
83
84 City
Orange City FL 85 Zip Code
32763

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]* V. RES. *[Signature]* **Resort Manager**
 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE: **1-27-97**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD FEROLIE, LAWRENCE 807 FLAMINGO DR HOLLY HILL FL <input checked="" type="checkbox"/> DELETE	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD PARRISSI, LEWIS 1074 E FRENCH AVE ORANGE CITY FL <input type="checkbox"/> DELETE	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD CORTESE, JAMES 117 POWER HORN CT DAYTONA BEACH FL <input type="checkbox"/> DELETE	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD SIMMONS, MARY 2649 RENTZ RD JACKSONVILLE FL <input type="checkbox"/> DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CREEKMORE, WILLIAM 2478 FIELDINGWOOD ROAD MAITLAND FL 32751-3633 <input type="checkbox"/> DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GRUBIAK, PEGGY 336 MORNINGSIDE AVE DAYTONA BEACH FL 32118 <input checked="" type="checkbox"/> DELETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

President <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
Lewis A. Parissi
1074 E. French Ave.
Orange City, FL 32763
Vice President <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
Curtis Ridgard
1575 Aviation Center Pkwy #406
Daytona Beach, FL 32114
Director <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
Walter Baker
2960 Ranchette Sq.
Gulf Breeze, FL 32561

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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]* **1-27-97**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #0002266

CR2E037 (9/96)