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Mar 10 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997



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

DOCUMENT # N25432 (8)
1. Corporation Name

TEQUESTA MAINTENANCE ASSOCIATION, INC.



Principal Place of Business: 1067 SHOTGUN RD. SUNRISE FL 33326
Mailing Address: 1067 SHOTGUN RD. SUNRISE FL 33326-1911

3. Date Incorporated or Qualified: 03/16/1988
3a. Date of Last Report: 02/13/1996
4. FEI Number: 65-0087697
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

2. Principal Place of Business: 21, 22, 23, 24
2a. Mailing Address: 26, 27, 28, 29, 30
Suite, Apt. #, etc.
City & State
Zip Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

ROSEN ROSEN & KREILING P.A.
1625-N COMMERCE PKWY
#225
FT. LAUDERDALE FL 33326

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 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: [Signature] 1-17-97
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS
TITLE [] DELETE
NAME PD SMOLEY, RENEE
STREET ADDRESS 1032 PINE BRANCH DR.
CITY-ST-ZIP FT. LAUDERDALE FL
TITLE [] DELETE
NAME D REYNARD, SUSAN
STREET ADDRESS 1265 MANOR COURT
CITY-ST-ZIP FT. LAUDERDALE FL
TITLE [] DELETE
NAME D STEINMAN, JOSEPH
STREET ADDRESS 1214 MANOR DRIVE SOUTH
CITY-ST-ZIP FT. LAUDERDALE FL
TITLE [] DELETE
NAME D RENARD, SUSAN
STREET ADDRESS 1265 MANOR COURT
CITY-ST-ZIP FT. LAUDERDALE FL
TITLE [] DELETE
NAME V SILVER, MIKE
STREET ADDRESS 1246 JASIMINE CIRCLE
CITY-ST-ZIP FT. LAUDERDALE FL
TITLE [] DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
1.1 TITLE [] Change [] Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP
2.1 TITLE [] Change [] Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP
3.1 TITLE [] Change [] Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP
4.1 TITLE [] Change [] Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP
5.1 TITLE [] Change [] Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP
6.1 TITLE [] Change [] Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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] REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/13/97

CR2E037 (9/96)