	NOTICE: CORPORATION WILL BE C	DISSOLVED ON OR AFTER AL	JGUST 7. 1996.		
MOUNT DUE ON NO COR ANNU	NOR BEFORE 87/96: \$61.25 (IF DISSOL INPROFIT PORATION JAL REPORT 1996	FLORIDA DEPARTM Sandra B. M Secretary of DIVISION OF COL	O REINSTATE: \$236. MENT OF STATE Mortham of State	25.)	
DOCUI	MENT # N2894	8 (0)	,		
	name Na village at fisher isla	\-\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\	0.		
Principal Place	ASSOCIATION, INC.	Mailing Address			
•	ISLAND DRIVE ISLAND DR.	ONE FISHER ISLAND DRIVE ONE FISHER ISLAND DR. FISHER ISLAND FL 33109	Ē		[0.0()
US		US		 Date Incorporated or Qualified 10/20/1988 	3a. Date of Last Report 04/28/1995
2. Principal Pi	lace of Business	2a. Mailing Address		4. FEI Number 65-0087856	Applied For Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	·	5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	9	City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country	8. This corporation has liability for int	tangible tax under s. 199.032,
24	25 9. Name and Address of Current	29 36 Registered Agent		Florida Statutes 10. Name and Address of New Regi	
e Polk Maid	O LOCEDIL O		81 Name	ROBERT E. TORTER	
	D, JOSEPH G. FISHER ISLAND DRIVE			Address (P.O. Box Number is Not Acceptable 2416 FISHER ISLAND DR	
	R ISLAND FL 33109		63		
				ISHER ISLAND	FL 85 Zip Code 33109
11. Pursuant office or re	to the provisions of Sections 617,0592 egistered agent, or both in the State of	and 617.1508, Florida Statutes, Florida, Such change was auth	the above-named on	corporation submits this statement for the pur- pration's board of directors. I hereby accept the	pose of changing its registered he appointment as registered
agent. I a SIGNATURE	m familiar with, and accept the obligati	ons of Section 617.0503, Florid	la Statutes.	7	13196
SIGNATURE .	Signature, typed of printed name of registered agent		Registered Agent signature	required when reinstating)	DATE
12				ADDITIONS/CHANGES TO OFFICE	RS AND DIRECTORS IN 12
12. TITLE	OFFICERS AND	DELETE	1.1 TITLE	ADDITIONS/CHANGES TO OFFICE SECRETARY & DIRECTOR	RS AND DIRECTORS IN 12 Change X Addition
TITLE NAME	SD THOMAS, MICHAEL		1.1 TITLE 1.2 NAME	SECRETARY & DIRECTOR THOMAS P. WICKY	
TITLE NAME STREET ADDRESS	SD		1.1 TITLE	SECRETARY & DIRECTOR THOMAS P. WICKY ONE FISHER ISLAND DRIV	E 9
TITLE NAME	SD THOMAS, MICHAEL ONE FISHER ISLAND DR. FISHER ISLAND FL TD		1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP 2.1 TITLE	SECRETARY & DIRECTOR THOMAS P. WICKY ONE FISHER ISLAND DRIV FISHER ISLAND, FL 3310 PRESIDENT, TREASURER &	E 9
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	SD THOMAS, MICHAEL ONE FISHER ISLAND DR. FISHER ISLAND FL TD TORTER, ROBERT E.	⊠ D€LET€	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST-ZIP 2.1 TITLE 2.2 NAME	SECRETARY & DIRECTOR THOMAS P. WICKY ONE FISHER ISLAND DRIV FISHER ISLAND,FL 3310 PRESIDENT,TREASURER & ROBERT E. TORTER	E 9 D Mange Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	THOMAS, MICHAEL ONE FISHER ISLAND DR. FISHER ISLAND FL. TD TORTER, ROBERT E. 2416 FISHER ISLAND DR. FISHER ISLAND NY PD DIMINO, JOSEPH C. 2436 FISHER ISLAND DR. FISHER ISLAND FL	DELETE DELETE DELETE DELETE DELETE DELETE	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	SECRETARY & DIRECTOR THOMAS P. WICKY ONE FISHER ISLAND DRIV FISHER ISLAND, FL 3310 PRESIDENT, TREASURER & ROBERT E. TORTER 2416 FISHER ISLAND DRI FISHER ISLAND, FL 331 -08/09/960103: ***61.25 qualify for the exemption stated in Section 11	E 9 D Mange Addition VE 09 Change Addition Change Addition Change Addition Change Addition One Addition One Addition One One Addition One
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