

FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **N31091** (4)

1. Corporation Name
HOMEOWNERS' ASSOCIATION OF PLANTATION POINTE, IN C.



Principal Place of Business: C/O OF FRANK WEISS, 1988 CAROLINA CT, CLEARWATER FL 34620 US
Mailing Address: C/O OF FRANK WEISS, 1988 CAROLINA CT, CLEARWATER FL 34620 US

3. Date Incorporated or Qualified: 03/09/1989
3a. Date of Last Report: 04/03/1995

21	2. Principal Place of Business	2a	Mailing Address	4	FEI Number	Applied For
22	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	59-2942667		Not Applicable
23	City & State	27	City & State	5	Certificate of Status Desired	\$8.75 Additional Fee Required
24	Zip	28	Zip			
25	Country	29	Country	6	Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
30		30		8	This corporation has liability for intangible tax under s. 199.032, Florida Statutes	Yes No

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
WEISS, FRANK B 1988 CAROLINA CT CLEARWATER FL 34620		81	Name
		82	Street Address (P.O. Box Number is Not Acceptable)
		83	
		84	City
		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: _____ (NOTE: Registered Agent signature required when reinstating) DATE: _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	STD WEISS, FRANK 1988 CAROLINA CT CLEARWATER FL	1.1 TITLE	
NAME		1.2 NAME	
STREET ADDRESS		1.3 STREET ADDRESS	
CITY-ST-ZIP		1.4 CITY-ST-ZIP	
TITLE	VPD BAMBAGE, JOHN 1979 CAROLINA CT CLEARWATER FL	2.1 TITLE	PD
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	PD PROFETA, ANTHONY 1990 CAROLINA CT CLEARWATER FL	3.1 TITLE	VPD
NAME		3.2 NAME	DAVID HO
STREET ADDRESS		3.3 STREET ADDRESS	1986 CAROLINA CT.
CITY-ST-ZIP		3.4 CITY-ST-ZIP	CLEARWATER FL.
TITLE	VPD	4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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 119.07(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: *Frank Weiss* FRANK WEISS 1/19/96 (813) 535-8800

CR2E037 (12/95)