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FILED
Mar 13 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 # N38424 (0)

1. Corporation Name

THE NEW FRENCH VILLAGE CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business

Mailing Address

% TRIZEL COMMERCIAL REAL ESTATE
250 CATALONIA AVE. SUITE 305
CORAL GABLES FL 33134

% TRIZEL COMMERCIAL REAL ESTATE
250 CATALONIA AVE. SUITE 305
CORAL GABLES FL 33134-6730

3. Date Incorporated or Qualified
05/31/1990

3a. Date of Last Report
03/14/1996

2. Principal Place of Business

2a. Mailing Address

4. FEI Number
65-0305243

Applied For
Not Applicable

21 State, Apt. #, etc.

26 Suite, Apt. #, etc.

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

22 City & State

27 City & State

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

23 Zip

Country

28 Zip

Country

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes Yes No

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

GONZALES, MARITZA
2333 PONCE DE LEON BLVD.
THE COLONNADE, SUITE 650
CORAL GABLES FL 33134

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 of the registered agent or registered agent and the principal

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE DELETE

11 TITLE Change Addition

NAME
PD
PALLOT, NORTON
STREET ADDRESS
610 VALENCIA AVENUE
CITY - ST - ZIP
CORAL GABLES FL 33134

12 NAME
D
YAWN, JAMES
13 STREET ADDRESS
602 VALENCIA AVENUE
14 CITY - ST - ZIP
CORAL GABLES, FL. 33134

TITLE DELETE

21 TITLE Change Addition

NAME
D
CROW, PAT MRS.
STREET ADDRESS
2600 SEGOVIA STREET
CITY - ST - ZIP
CORAL GABLES FL

22 NAME

23 STREET ADDRESS

24 CITY - ST - ZIP

TITLE DELETE

31 TITLE Change Addition

NAME
D
LANDY, ELEONOR
STREET ADDRESS
601 ALMERIA AVENUE
CITY - ST - ZIP
CORAL GABLES FL

32 NAME

33 STREET ADDRESS

34 CITY - ST - ZIP

TITLE DELETE

41 TITLE Change Addition

NAME

42 NAME

43 STREET ADDRESS

44 CITY - ST - ZIP

TITLE DELETE

51 TITLE Change Addition

NAME

52 NAME

53 STREET ADDRESS

54 CITY - ST - ZIP

TITLE DELETE

61 TITLE Change Addition

NAME

62 NAME

63 STREET ADDRESS

64 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:

Sandra B. Mortham
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/10/97
Date

305-441-0040
Daytime Phone #

0026926

CR2E037 (9/96)