

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 # **N47191 (4)**
1. Corporation Name
ULTIMAR TWO CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business: **1540 GULF BLVD. CLEARWATER FL 33630**
Mailing Address: **1540 GULF BLVD. CLEARWATER FL 33630**

3. Date Incorporated or Qualified: **02/06/1992**
3a. Date of Last Report: **03/13/1995**

2. Principal Place of Business (21-24) and 2a. Mailing Address (26-30) fields with sub-headers for Suite, City & State, Zip, and Country.

4. FEI Number: **59-3112883**
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

9. Name and Address of Current Registered Agent
**FLORIDA CENTRAL MANAGEMENT
2430 ESTANCIA BLVD.
SUITE 114
CLEARWATER FL 34621**

10. Name and Address of New Registered Agent
81 Name: **Becker & Poliakoff P.A.**
82 Street Address: **5999 Central Avenue**
83 **Suite 104**
84 City: **St. Petersburg** FL 85 Zip Code: **33710**

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 617.050, Florida Statutes.

SIGNATURE: *[Signature]* DATE: **6/11/96**

12. OFFICERS AND DIRECTORS

TITLE	PD	<input checked="" type="checkbox"/> DELETE
NAME	WEAVER, MARILYN	
STREET ADDRESS	1540 GULF BLVD., UNIT #1407	
CITY - ST - ZIP	CLEARWATER FL 34630	
TITLE	VPD	<input checked="" type="checkbox"/> DELETE
NAME	DEWITT, PAUL L	
STREET ADDRESS	1540 GULF BOULEVARD, UNIT #1001	
CITY - ST - ZIP	CLEARWATER FL 34630	
TITLE	SD	<input checked="" type="checkbox"/> DELETE
NAME	BROSIOUS, JAMES	
STREET ADDRESS	1540 GULF BLVD., UNIT #1504	
CITY - ST - ZIP	CLEARWATER FL 34630	
TITLE	TD	<input checked="" type="checkbox"/> DELETE
NAME	VAN WINGERDEN, JOHN	
STREET ADDRESS	1540 GULF BLVD., UNIT #1801	
CITY - ST - ZIP	CLEARWATER FL 34630	
TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	ZOUHEIR, FARAH	
STREET ADDRESS	1540 GULF BLVD., UNIT #1804	
CITY - ST - ZIP	CLEARWATER FL 34630	
TITLE		<input checked="" type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	PD	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	Michael T. Dooley	
1.3 STREET ADDRESS	1540 Gulf Blvd., Unit #306	
1.4 CITY - ST - ZIP	Clearwater, FL 34630	
2.1 TITLE	VPD	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	Paul L. DeWitt	
2.3 STREET ADDRESS	1540 Gulf Blvd., Unit #1001	
2.4 CITY - ST - ZIP	Clearwater, FL 34630	
3.1 TITLE	SD	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	Gail E. Hunsaker	
3.3 STREET ADDRESS	1540 Gulf Blvd., Unit #303	
3.4 CITY - ST - ZIP	Clearwater, FL 34630	
4.1 TITLE	TD	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	Joseph F. Warren	
4.3 STREET ADDRESS	1540 Gulf Blvd., Unit #406	
4.4 CITY - ST - ZIP	Clearwater, FL 34630	
5.1 TITLE	D	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	Bert Miedler	
5.3 STREET ADDRESS	1540 Gulf Blvd., Unit #1907	
5.4 CITY - ST - ZIP	Clearwater, FL 34630	
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY - ST - ZIP		

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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: *[Signature]* DATE: **6/22/96**

CR2E037 (12/95)