

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
 AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

Amended

FILED

96 DEC 31 PM 3:26

SECRETARY OF STATE
 TALLAHASSEE FLORIDA

PROFIT CORPORATION ANNUAL REPORT 1996

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

DOCUMENT # N93000003634 (3)
 1. Corporation Name
 Thatcher's Landing Condominium No. 5 Association, Inc.

Principal Place of Business Mailing Address
 820 Palmway St. Same
 Kissimmee, Fl 34744

3. Date Incorporated or Qualified 8/1/893
 3a. Date of Last Report 1996

2. Principal Place of Business 21 820 Palmway St.
 2a. Mailing Address 26 820 Palmway St.

4. FEI Number 59-3234650
 Applied For Not Applicable

22 Suite, Apt. #, etc.
 27 Suite, Apt. #, etc.

5. Certificate of Status Desired \$8.75 Additional Fee Required

23 City & State Kissimmee, Fl
 28 City & State Kissimmee, Fl

6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees

24 Zip 34744 25 Country USA
 29 Zip 34744 30 Country USA

6. 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

Thomas D. Malcolm
 2180 Park Avenue N. #326
 Winter Park, Fl 32789

81 Name Vicki Ferdinansen
 World of Homes
 82 Street Address (P.O. Box Number is Not Acceptable)
 820 Palmway St.

24 Zip 34744 25 Country USA
 29 Zip 34744 30 Country USA

83
 84 City Kissimmee FL 85 Zip Code 34744

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE *[Signature]*

(Not if Registered Agent signature is required when reinstating) DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D
 NAME Linda Behers DELETE
 STREET ADDRESS 987 Tillery Way
 CITY- ST- ZIP Orlando, Fl 32828

1.1 TITLE PD
 1.2 NAME Benn Aaronson Change Addition
 1.3 STREET ADDRESS 955 Tillery Way
 1.4 CITY- ST- ZIP Orlando, Fl 32828

TITLE STD
 NAME Susan Anderson DELETE
 STREET ADDRESS 957 Tillery Way
 CITY- ST- ZIP Orlando, Fl 32828

2.1 TITLE STD
 2.2 NAME Mary Lyn Ryce Change Addition
 2.3 STREET ADDRESS 949 Tillery Way
 2.4 CITY- ST- ZIP Orlando, Fl 32828

TITLE PD
 NAME Kathy Majka DELETE
 STREET ADDRESS 989 Tillery Way
 CITY- ST- ZIP Orlando, Fl 32828

3.1 TITLE V
 3.2 NAME Kathy Majka Change Addition
 3.3 STREET ADDRESS 989 Tillery Way
 3.4 CITY- ST- ZIP Orlando, Fl 32828

TITLE
 NAME
 STREET ADDRESS
 CITY- ST- ZIP

4.1 TITLE
 4.2 NAME
 4.3 STREET ADDRESS
 4.4 CITY- ST- ZIP

TITLE
 NAME
 STREET ADDRESS
 CITY- ST- ZIP

5.1 TITLE
 5.2 NAME
 5.3 STREET ADDRESS
 5.4 CITY- ST- ZIP

TITLE
 NAME
 STREET ADDRESS
 CITY- ST- ZIP

6.1 TITLE
 6.2 NAME
 6.3 STREET ADDRESS
 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: *[Signature]*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

11/6/96 380-8250
 Date Daytime Phone #

CR2E034 (3/96)

[Handwritten initials]