

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 City & State Kissimmee, Fl

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

10. Name and Address of New Registered Agent
 81 Name Vicki Ferdinansen
 World of Homes
 82 Street Address (P.O. Box Number is Not Acceptable)
 820 Palmway St.
 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 and family will not accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE *[Signature]* DATE

12. OFFICERS AND DIRECTORS
 TITLE D NAME Linda Behers
 STREET ADDRESS 987 Tillery Way
 CITY- ST- ZIP Orlando, Fl 32828
 TITLE STD NAME Susan Anderson
 STREET ADDRESS 957 Tillery Way
 CITY- ST- ZIP Orlando, Fl 32828
 TITLE PD NAME Kathy Majka
 STREET ADDRESS 989 Tillery Way
 CITY- ST- ZIP Orlando, Fl 32828
 TITLE NAME
 STREET ADDRESS
 CITY- ST- ZIP
 TITLE NAME
 STREET ADDRESS
 CITY- ST- ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
 1.1 TITLE PD Benn Aaronson
 1.2 NAME
 1.3 STREET ADDRESS 955 Tillery Way
 1.4 CITY- ST- ZIP Orlando, Fl 32828
 2.1 TITLE STD Mary Lyn Ryce
 2.2 NAME
 2.3 STREET ADDRESS 949 Tillery Way
 2.4 CITY- ST- ZIP Orlando, Fl 32828
 3.1 TITLE V Kathy Majka
 3.2 NAME
 3.3 STREET ADDRESS 989 Tillery Way
 3.4 CITY- ST- ZIP Orlando, Fl 32828
 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
 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]* DATE 11/6/96
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
 Daytime Phone # 380-8250

CR2E034 (3/96)

[Handwritten initials]