

FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # N95000004111 (9)

1. Corporation Name
VILLA VIZCAYA PROPERTY OWNERS ASSOCIATION, INC.



Principal Place of Business
~~11300 EL CLAIR RANCH RD
BOYNTON BEACH FL 33437~~

Mailing Address
~~11500 EL CLAIR RANCH RD
BOYNTON BEACH FL 33437~~

3. Date Incorporated or Qualified **08/28/1995** 3a. Date of Last Report

2. Principal Place of Business
21 **16197 Villa Vizcaya Pl** 2a. Mailing Address
26 **16197 Villa Vizcaya Pl**

4. FEI Number Applied For
 Not Applicable

Suite, Apt. #, etc. 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 **Delray Beach, FL** 28 **Delray Beach, FL**

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

24 **33446** 25 **USA** 29 **33446** 30 **USA**

9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent

PROUJANSKY, ALBERT N
~~11500 EL CLAIR RANCH RD
BOYNTON BEACH FL 33437~~

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
16197 Villa Vizcaya Pl.
83
84 City **Delray Beach** 85 Zip Code **FL 33446**

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 _____ DATE _____
Signature, typed or printed name of registered agent, if applicable. (NOTE: Registered Agent signature required when re-appointing)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	NAME	1.1 TITLE	1.2 NAME
<input type="checkbox"/> DELETE	D GREENBERG, LEONARD	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
	11500 EL CLAIR RANCH RD BOYNTON BEACH FL 33437		16197 Villa Vizcaya Pl. Delray Beach, FL 33446
<input type="checkbox"/> DELETE	D PROUJANSKY, AL	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
	11500 EL CLAIR RANCH RD BOYNTON BEACH FL 33437		16197 Villa Vizcaya Pl Delray Beach, FL 33446
<input type="checkbox"/> DELETE	D RUBIN, SHELDON W	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
	11500 EL CLAIR RANCH RD BOYNTON BEACH FL 33437		16197 Villa Vizcaya Pl. Delray Beach, FL 33446
<input type="checkbox"/> DELETE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<input type="checkbox"/> DELETE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<input type="checkbox"/> DELETE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	

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 any attachments with an address

SIGNATURE: DATE: _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Sheldon Rubin

CR2E037 (12/95)