FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

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

APPROVED AND FILED
95 MAY -1 PM 8:41
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 717919 (5)

1. Corporation Name
FLORIDA APARTMENT ASSOCIATION, INC.

Principal Place of Business	Mailing Address
1133 W MORSE BLVD SUITE 201 WINTER PARK FL 32789	1133 W MORSE BLVD SUITE 201 WINTER PARK FL 32789

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 01/20/1970
3a. Date of Last Report: 05/01/1994
4. FEI Number: 59-1309017 ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ **$68.75** Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☑ No

2. Principal Place of Business (21): Suite, Apt. #, etc. (22): City & State (23): Zip (24) Country (25)

2a. Mailing Address (26): Suite, Apt. #, etc. (27): City & State (28): Zip (29) Country (30)

9. Name and Address of Current Registered Agent

CROW,PAT
1133 W. MORSE, STE. 201
WINTER PARK FL 32789

10. Name and Address of New Registered Agent

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 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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	TD	1.1 TITLE	VP /D	☒ Change ☐ Addition
NAME	CAVARETTA, NAN	1.2 NAME	Cavaretta, Nan	
STREET ADDRESS	622 SAILFISH ROAD	1.3 STREET ADDRESS	622 Sailfish Road	
CITY-ST-ZIP	WINTER SPRINGS FL	1.4 CITY-ST-ZIP	Winter Springs, FL 32708	
TITLE	V	2.1 TITLE	T /D	☒ Change ☐ Addition
NAME	ANDERSEN, VICKIE	2.2 NAME	Mason, June	
STREET ADDRESS	2200 LUCIEN WAY #2110	2.3 STREET ADDRESS	2180 West SR 434, #6116	
CITY-ST-ZIP	MAITLAND FL	2.4 CITY-ST-ZIP	Longwood, FL 32779	
TITLE	VD	3.1 TITLE	PE	☒ Change ☐ Addition
NAME	BRADBURN, CAREY	3.2 NAME	Bradburn, Carey	
STREET ADDRESS	1331 PALMETTO AVE #201	3.3 STREET ADDRESS	541 S. Orlando Avenue, #200	
CITY-ST-ZIP	WINTER PARK FL	3.4 CITY-ST-ZIP	Maitland, FL 32751	
TITLE	PD	4.1 TITLE	PP	☐ Change ☐ Addition
NAME	BURNS, CHRIS	4.2 NAME	Burns, Chris	
STREET ADDRESS	1 PARK PLACE 621 NW 53 ST #125	4.3 STREET ADDRESS	14499 N. Dale Mabry Hwy, #201	
CITY-ST-ZIP	BOCA RATON FL	4.4 CITY-ST-ZIP	Tampa, FL 33618	
TITLE	SD	5.1 TITLE	VP /D	☒ Change ☐ Addition
NAME	FITZPATRICK, CHRISTINA M	5.2 NAME	Fitzpatrick, Christina	
STREET ADDRESS	9424 BAYMEADOWS RD #120	5.3 STREET ADDRESS	92424 Baymeadows Rd.	
CITY-ST-ZIP	JACKSONVILLE FL	5.4 CITY-ST-ZIP	Jacksonville, FL 32256	
TITLE	PE	6.1 TITLE	P /D	☒ Change ☐ Addition
NAME	BEVIS, MARIE	6.2 NAME	Bevis, Marie	
STREET ADDRESS	1 PARK PLACE 621 NW 53 ST #125	6.3 STREET ADDRESS	One Park Place, 621 NW 53rd St., #125	
CITY-ST-ZIP	BOCA RATON FL	6.4 CITY-ST-ZIP	Boca Raton, FL 33487	

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)(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: Marie Bevis
SIGNATURE AND TYPED OR PRINTED NAME OF MAKING OFFICER OR DIRECTOR — Date — Daytime Phone #

0000451