

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 # 743111 (7)

1. Corporation Name

CAPRI G ASSOCIATION, INC.



Principal Place of Business

Mailing Address

PRIME MANAGEMENT GROUP, INC.
1051 SOUTH ROGERS CIRCLE
BOCA RATON FL 33487

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1051 SOUTH ROGERS CIRCLE
BOCA RATON FL 33487

3. Date Incorporated or Qualified
06/02/1978

3a. Date of Last Report
05/01/1995

4. FEI Number
59-1865578

Applied For
Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

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 intangibles under s. 199.032,
Florida Statutes

Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

RAIBLE, RONALD
1051 SOUTH ROGERS CIRCLE
BOCA RATON FL 33487

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 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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE P
NAME GRONOWETTER, MOE
STREET ADDRESS KINGS PT. CAPRI G 314
CITY - ST - ZIP DELRAY BEACH FL

11 TITLE AGENT
12 NAME RAIBLE, RONALD
13 STREET ADDRESS 6300 PARK OF COMMERCE BLVD.
14 CITY - ST - ZIP BOCA RATON, FL 33487

TITLE V
NAME SILVERBERG, ALVIN
STREET ADDRESS KINGS PT. CAPRI G 323
CITY - ST - ZIP DELRAY BEACH FL

21 TITLE
22 NAME
23 STREET ADDRESS
24 CITY - ST - ZIP

TITLE S
NAME STERN, LAURA
STREET ADDRESS KINGS PT. CAPRI G 324
CITY - ST - ZIP DELRAY BEACH FL

31 TITLE
32 NAME
33 STREET ADDRESS
34 CITY - ST - ZIP

TITLE DT
NAME WEISS, ANNETTE
STREET ADDRESS 304 CAPRI G
CITY - ST - ZIP DELRAY BEACH FL

41 TITLE
42 NAME
43 STREET ADDRESS
44 CITY - ST - ZIP

TITLE D
NAME STEIN, MAX
STREET ADDRESS CAPRI G 331
CITY - ST - ZIP DELRAY BEACH FL

51 TITLE D
52 NAME COOPER, LEONARD
53 STREET ADDRESS 300 CAPRI G
54 CITY - ST - ZIP DELRAY BEACH FL

TITLE D
NAME JAFFE, MURIEL
STREET ADDRESS 295 CAPRI G
CITY - ST - ZIP DELRAY BEACH FL

61 TITLE D
62 NAME FETTER, JEANNETTE
63 STREET ADDRESS 292 CAPRI G
64 CITY - ST - ZIP DELRAY BEACH FL

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:

Alvin Silverberg V.P.
Alvin Silverberg

3/28/96

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CR2E037 (12/95)