

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 # **N31027 (8)**
1. Corporation Name
GRAND PALMS COMMUNITY ASSOCIATION, INC.



Principal Place of Business: 951 BROKEN SOUND PARKWAY SUITE 250 BOCA RATON FL 33487 US
Mailing Address: 951 BROKEN SOUND PARKWAY SUITE 250 BOCA RATON FL 33487 US

3. Date Incorporated or Qualified: 03/07/1989
3a. Date of Last Report: 05/01/1995
4. FEI Number: 65-0101904
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 intangible tax under s. 199.032, Florida Statutes: Yes No

2. Principal Place of Business (21-24) and 2a. Mailing Address (25-30) fields with sub-headers for Suite, City & State, Zip, and Country.

9. Name and Address of Current Registered Agent
COMMUNITY ASSN SERVC INC
951 BROKEN SOUND PARKWAY SUITE 250 BOCA RATON FL 33487

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable): 300001839919
83 -05/25/96--01003--034
84 City: ***61.25
85 Zip Code: FL

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: _____ (NOTE: Registered Agent signature required when reinstating) DATE: _____

12. OFFICERS AND DIRECTORS
 TITLE NAME STREET ADDRESS CITY-ST-ZIP
 PD SEGALL, E.M. 14800 PINES BLVD. PEMBROKE PINES FL
 VD SEGALL, SANDY 14800 PINES BLVD. PEMBROKE PINES FL
 ST SEGALL, SANDY 14800 PINES BLVD. PEMBROKE PINES FL
 (Additional empty rows for officers and directors)

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
 1.1 TITLE: D
 1.2 NAME: RON MARTIN
 1.3 STREET ADDRESS: 1442 LA COSTA DRIVE EAST
 1.4 CITY-ST-ZIP: PEMBROKE PINES, FL 33027
 2.1 TITLE: D
 2.2 NAME: ALVIN ENTIN
 2.3 STREET ADDRESS: 951 BROKEN SOUND PARKWAY
 2.4 CITY-ST-ZIP: BOCA RATON, FL 33487
 3.1 TITLE: D
 3.2 NAME: JUDY SEGALL
 3.3 STREET ADDRESS: 14800 PINES BLVD.
 3.4 CITY-ST-ZIP: PEMBROKE PINES, FL
 4.1 TITLE: SD
 4.2 NAME: ALLAN SEGALL
 4.3 STREET ADDRESS: 14800 PINES BLVD.
 4.4 CITY-ST-ZIP: PEMBROKE PINES, FL
 (Additional empty rows for additions/changes)

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] 4/21/96 407-994-1788
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Disting. Phone #

CR2E037 (12/95)