

FILE NOW: FILING FEE IS \$61.25

FILED  
Feb 10 1997 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997



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

DOCUMENT # 752721 (1)

1. Corporation Name  
POINCIANA ISLAND YACHT AND RACQUET CLUB CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business Mailing Address  
350 POINCIANA ISLAND DR MIAMI BCH FL 33160 350 POINCIANA ISLAND DR MIAMI BCH FL 33160

3. Date Incorporated or Qualified 06/02/1980 3a. Date of Last Report 09/23/1996

21	2. Principal Place of Business	2a. Mailing Address	4. FEI Number	Applied For
	Suite, Apt. #, etc.	Suite, Apt. #, etc.	59-2025683	Not Applicable
22	City & State	City & State	5. Certificate of Status Desired	\$8.75 Additional Fee Required
	Zip	Country	<input type="checkbox"/>	\$5.00 May Be Added to Fees
23	City & State	City & State	6. Election Campaign Financing Trust Fund Contribution	<input type="checkbox"/>
24	Zip	Country	28	29
	Country	Country	30	
			8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes	<input type="checkbox"/> Yes <input type="checkbox"/> No

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent		
BUCHBINDER, STUART 350 POINCIANA ISLAND DRIVE MIAMI FL 33160		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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P GILBERT, JOHN	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	350 POINCIANA ISLAND DRIVE	1.2 NAME	
STREET ADDRESS	MIAMI FL	1.3 STREET ADDRESS	
CITY - ST - ZIP		1.4 CITY - ST - ZIP	
TITLE	DT ABRAMSON, HERB	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	350 POINCIANA ISLAND DR	2.2 NAME	
STREET ADDRESS	MIAMI FL	2.3 STREET ADDRESS	
CITY - ST - ZIP		2.4 CITY - ST - ZIP	
TITLE	TT GRUENWURZEL, LEO	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	350 POINCIANA ISLAND DR	3.2 NAME	
STREET ADDRESS	MIAMI FL	3.3 STREET ADDRESS	
CITY - ST - ZIP		3.4 CITY - ST - ZIP	
TITLE	SD SIEBER, PATRICIA	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	350 POINCIANA ISLAND DR	4.2 NAME	
STREET ADDRESS	MIAMI FL	4.3 STREET ADDRESS	
CITY - ST - ZIP		4.4 CITY - ST - ZIP	
TITLE	DT DONALD, RHODES	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	350 POINCIANA ISLAND DR	5.2 NAME	
STREET ADDRESS	MIAMI FL	5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE	DT MAVROLEON, MACE	6.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	350 POINCIANA ISLAND DR	6.2 NAME	
STREET ADDRESS	MIAMI FL	6.3 STREET ADDRESS	
CITY - ST - ZIP		6.4 CITY - ST - ZIP	

JAN 15 1997  
R G

14. I do hereby certify that the information supplied with this filing 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 or changed, or on an attachment with an address.

SIGNATURE: *[Signature]* REQUIRED

CR2E037 (9/96)