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**Feb 25 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 # 720000 (9)

1. Corporation Name
ISLAND BREAKERS - A CONDOMINIUM, INC.



Principal Place of Business Mailing Address
150 OCEAN LANE DRIVE 150 OCEAN LANE DRIVE
KEY BISCAYNE FL 33149 KEY BISCAYNE FL 33149-1458

3. Date Incorporated or Qualified 3a. Date of Last Report
01/07/1971 04/24/1996

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

24 25 29 30

4. FEI Number Applied For
59-1312689 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Election Campaign Financing **\$5.00 May Be Added to Fees**

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**JANOFSKY, JUDY
150 OCEAN LANE DRIVE
KEY BISCAYNE FL 33149**

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 reinstating) DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD DELETE
NAME JANOFSKY, JUDY
STREET ADDRESS 150 OCEAN LANE DRIVE
CITY - ST - ZIP KEY BISCAYNE FL

1.1 TITLE Change Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP

TITLE VPD DELETE
NAME FONTS, BERT
STREET ADDRESS 150 OCEAN LANE DRIVE
CITY - ST - ZIP KEY BISCAYNE FL

2.1 TITLE Change Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP

TITLE TD DELETE
NAME COTE, RAYMOND
STREET ADDRESS 150 OCEAN LANE DRIVE
CITY - ST - ZIP KEY BISCAYNE FL

3.1 TITLE TD Change Addition
3.2 NAME SILVA, IGNACIO
3.3 STREET ADDRESS 150 OCEAN LANE DRIVE
3.4 CITY - ST - ZIP KEY BISCAYNE, FL. 33149

TITLE SD DELETE
NAME PRIDGEON, ALEIDA
STREET ADDRESS 150 OCEAN LANE DRIVE
CITY - ST - ZIP KEY BISCAYNE FL 33149

4.1 TITLE Change Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP

TITLE D DELETE
NAME CONSUEGRA, MIRIAM
STREET ADDRESS 150 OCEAN LANE DRIVE
CITY - ST - ZIP KEY BISCAYNE FL

5.1 TITLE Change Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP

TITLE D DELETE
NAME KIPFER, MARGRIT
STREET ADDRESS 150 OCEAN LANE DRIVE
CITY - ST - ZIP KEY BISCAYNE FL 33149

6.1 TITLE D Change Addition
6.2 NAME RECKNOR, TERRI LYNN
6.3 STREET ADDRESS 150 OCEAN LANE DRIVE
6.4 CITY - ST - ZIP KEY BISCAYNE, FL. 33149

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 19.07(5)(b), 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: *Judy Janofsky* President 2/18/97

CR2E037 (9/96)