

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED

May 09 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 501119 (2)
 1. Corporation Name
FLORIDANA HOMEOWNERS, INC.

Principal Place of Business 304 52ND AVE.TERR. W. BRADENTON FL 34207	Mailing Address 304 52ND AVE.TERR. W. BRADENTON FL 34207-2952
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2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 04/13/1976	3a. Date of Last Report 01/23/1996
21 Suite, Apt. #, etc.	22 City & State	26 Suite, Apt. #, etc.	27 City & State	4. FEI Number 59-1710497	Applied For <input type="checkbox"/> Not Applicable
23 Zip	25 Country	29 Zip	30 Country	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees
				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	
VENABLE, JOSEPH 1400 4TH AVENUE WEST BRADENTON FL 34205		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: _____ (NOTE: Registered Agent signature required when reinstating) DATE: _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P <input checked="" type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SENG, JAMES	1.2 NAME	Irwin Keller
STREET ADDRESS	109-52ND AVE. DR. W	1.3 STREET ADDRESS	409 51st Ave. Terr. W.
CITY-ST-ZIP	BRADENTON FL	1.4 CITY-ST-ZIP	Bradenton, FL. 34207
TITLE	V <input checked="" type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	GLOSSER, NORMAN	2.2 NAME	John Knierim
STREET ADDRESS	117-52ND AVE. W	2.3 STREET ADDRESS	303 52nd Ave. Terr. W.
CITY-ST-ZIP	BRADENTON FL	2.4 CITY-ST-ZIP	Bradenton, FL. 34207
TITLE	S <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	STRICKLER, JOSEPH	3.2 NAME	D. Peter
STREET ADDRESS	218 52ND AVE PLAZA W	3.3 STREET ADDRESS	211 51st Ave. Dr. W. Bradenton
CITY-ST-ZIP	BRADENTON FL	3.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE	T <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	CHAPLIN, ROSE	4.2 NAME	J. Valentine
STREET ADDRESS	305 51ST AVE, DR.W.	4.3 STREET ADDRESS	115 52nd Ave. Terr. W. Bradenton
CITY-ST-ZIP	BRADENTON FL	4.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE	D <input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	KELLER, IRWIN	5.2 NAME	L. Derrington
STREET ADDRESS	409-51ST AVE TERR W	5.3 STREET ADDRESS	311 52nd Ave. W.
CITY-ST-ZIP	BRADENTON FL	5.4 CITY-ST-ZIP	Bradenton, FL. 34207
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		6.2 NAME	D
STREET ADDRESS		6.3 STREET ADDRESS	V. Barber
CITY-ST-ZIP		6.4 CITY-ST-ZIP	112 52nd Ave. W. Bradenton, FL 34207

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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or in an attachment with an address.

SIGNATURE: *Irwin Keller* **REQUIRED** April 28 1997 941-755-5666

CR2E034 (9/96)