

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 # 716138 (3)
1. Corporation Name
VILLA DEL SOL, INC.



Principal Place of Business Mailing Address
11000 S OCEAN DR. JENSEN BCH FL 34957
11000 S OCEAN DR. JENSEN BCH FL 34957

3. Date Incorporated or Qualified 03/03/1969
3a. Date of Last Report 03/27/1995

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 29 Zip Country 30

4. FEI Number 59-1909648 Applied For Not Applicable
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

9. Name and Address of Current Registered Agent
CORNETT, JANE L., ESQ.
401 EAST OCEOLA STREET
STUART 34994

10. Name and Address of New Registered Agent
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	PD WEBER, PETER	1.1 TITLE	PD BARONE, BETH
NAME	11000 S OCEAN DR., #4-E	1.2 NAME	11000 S. OCEAN DRIVE APT. 1-C
STREET ADDRESS	JENSEN BEACH FL	1.3 STREET ADDRESS	JENSEN BEACH, FL.
CITY-ST-ZIP		1.4 CITY-ST-ZIP	
TITLE	VPD BARONE, BETH	2.1 TITLE	VP01 BIRDSALL, TED
NAME	11000 S OCEAN DR. #1-C	2.2 NAME	11000 S. OCEAN DRIVE APT. 4-D
STREET ADDRESS	JENSEN BCH, FL 00000	2.3 STREET ADDRESS	JENSEN BEACH, FL
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	VPD RAYMOND, RAIMOND	3.1 TITLE	VP02 WEBER, PETER
NAME	11000 S OCEAN DRIVE, #4B	3.2 NAME	11000 S. OCEAN DRIVE APT. 4-E
STREET ADDRESS	JENSEN BCH, FL 00000	3.3 STREET ADDRESS	JENSEN BEACH, FL
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	SD SEPPI, CHARLOTTE	4.1 TITLE	200001847312
NAME	11000 S OCEAN DRIVE, #5K	4.2 NAME	-06/03/96--01023--031
STREET ADDRESS	JENSEN BCH, FL 00000	4.3 STREET ADDRESS	***61.25
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	T MILLER, DAVID	5.1 TITLE	T0 MERTZ, KEITH
NAME	11000 S OCEAN DRIVE, #6F	5.2 NAME	11000 S. OCEAN DRIVE APT. 6-L
STREET ADDRESS	JENSEN BCH, FL 00000	5.3 STREET ADDRESS	JENSEN BEACH, FL
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	D FEIST, JOHN	6.1 TITLE	D MILLER, DAVID
NAME	11000 S OCEAN DRIVE, #1F	6.2 NAME	11000 S. OCEAN DRIVE APT 6-F
STREET ADDRESS	JENSEN BEACH FL	6.3 STREET ADDRESS	JENSEN BEACH, FL.
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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STREET ADDRESS	JENSEN BEACH FL	1.3 STREET ADDRESS	JENSEN BEACH, FL.
CITY-ST-ZIP		1.4 CITY-ST-ZIP	
TITLE	VPD BARONE, BETH	2.1 TITLE	VP01 BIRDSALL, TED
NAME	11000 S OCEAN DR. #1-C	2.2 NAME	11000 S. OCEAN DRIVE APT. 4-D
STREET ADDRESS	JENSEN BCH, FL 00000	2.3 STREET ADDRESS	JENSEN BEACH, FL
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
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CITY-ST-ZIP		5.4 CITY-ST-ZIP	
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NAME	11000 S OCEAN DRIVE, #1F	6.2 NAME	11000 S. OCEAN DRIVE APT 6-F
STREET ADDRESS	JENSEN BEACH FL	6.3 STREET ADDRESS	JENSEN BEACH, FL.
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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: *Charlotte Seppe* 4/2/96 407-744-1557
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Charlotte Seppe
Date Daytime Phone

CR2E037 (12/95)