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Apr 23 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 716138 (3)

1. Corporation Name
VILLA DEL SOL, INC.



Principal Place of Business 11000 S OCEAN DR. JENSEN BCH FL 34957	Mailing Address 11000 S OCEAN DR. JENSEN BCH FL 34957-2686
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3. Date Incorporated or Qualified 03/03/1969	3a. Date of Last Report 05/01/1996
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2. Principal Place of Business 21	2a. Mailing Address 26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24	Country 25
Zip 29	Country 30

4. FEI Number 59-1909648	Applied For <input type="checkbox"/>	Not Applicable <input type="checkbox"/>
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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No		

9. Name and Address of Current Registered Agent

**CORNETT, JANE L, ESQ.
401 EAST OCEOLA STREET
STUART FL 34994**

10. Name and Address of New Registered Agent

B1 Name
B2 Street Address (P.O. Box Number is Not Acceptable)
B3
B4 City
B5 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		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	PD
NAME	BARONE, BETH	1.2 NAME	BARONE, BETH
STREET ADDRESS	11000 S OCEAN DR., #1-C	1.3 STREET ADDRESS	11000 S OCEAN DR, 1-C
CITY-ST-ZIP	JENSEN BEACH FL	1.4 CITY-ST-ZIP	JENSEN BEACH, FL
TITLE	VPD1	2.1 TITLE	VPD1
NAME	BIRDSALL, TED	2.2 NAME	BIRDSALL, TED
STREET ADDRESS	11000 S OCEAN DR. #4-D	2.3 STREET ADDRESS	11000 S OCEAN DR, #4-D
CITY-ST-ZIP	JENSEN BCH FL	2.4 CITY-ST-ZIP	JENSEN BEACH, FL
TITLE	VPD2	3.1 TITLE	VPD2
NAME	WEBER, PETER	3.2 NAME	WEBER, PETER
STREET ADDRESS	11000 S OCEAN DRIVE, #4-E	3.3 STREET ADDRESS	11000 S OCEAN DRIVE, #4-E
CITY-ST-ZIP	JENSEN BCH FL	3.4 CITY-ST-ZIP	JENSEN BEACH, FL
TITLE	SD	4.1 TITLE	SD
NAME	SEPPI, CHARLOTTE	4.2 NAME	SEPPI, CHARLOTTE
STREET ADDRESS	11000 S OCEAN DRIVE, #5-K	4.3 STREET ADDRESS	11000 S OCEAN DRIVE, #5-K
CITY-ST-ZIP	JENSEN BCH FL	4.4 CITY-ST-ZIP	JENSEN BEACH, FL
TITLE	TD	5.1 TITLE	TD
NAME	MERTZ, KEITH	5.2 NAME	MERTZ, KEITH
STREET ADDRESS	11000 S OCEAN DRIVE, #6-L	5.3 STREET ADDRESS	11000 S OCEAN DRIVE, 6-L
CITY-ST-ZIP	JENSEN BCH FL	5.4 CITY-ST-ZIP	JENSEN BEACH, FL
TITLE	D	6.1 TITLE	D
NAME	MILLER, DAVID	6.2 NAME	MILLER, DAVID
STREET ADDRESS	11000 S OCEAN DRIVE, #6-F	6.3 STREET ADDRESS	11000 S OCEAN DRIVE, #6-F
CITY-ST-ZIP	JENSEN BEACH FL	6.4 CITY-ST-ZIP	JENSEN BEACH, FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
Change <input type="checkbox"/>	Addition <input type="checkbox"/>

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 if changed or on an attachment with an address.

CR2E037 (9/96)

Beth Barone
David 97