

FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # 718325 (4)

1. Corporation Name

BLAIR HOUSE SOUTH - A CONDOMINIUM, INC.



Principal Place of Business

Mailing Address

**9100 W BAY HARBOR DRIVE
BAY HARBOR ISLAND FL 33154**

**9100 W BAY HARBOR DR
BAY HARBOR ISLAND FL 33154
US**

3. Date Incorporated or Qualified
03/20/1970

3a. Date of Last Report
09/15/1995

2. Principal Place of Business

2a. Mailing Address

21

26

4. FEI Number

59-1379288

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

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**STEARNS, MYRTLE
9100 W. BAY HARBOR DRIVE
BAY HARBOR ISLANDS FL 33154**

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: **P** DELETE
NAME: **SCHMAELING, RICHARD**
STREET ADDRESS: **9100 W BAY HARBOR DRIVE 10CE**
CITY-ST-ZIP: **BAY HARBOR ISLAND FL 33154** *Director*

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

TITLE: **VP** DELETE
NAME: **GOLDBERG, DAVID S**
STREET ADDRESS: **9100 W BAY HARBOR DRIVE 5AW**
CITY-ST-ZIP: **BAY HARBOR ISLAND FL 33154** *Director*

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

TITLE: **STU Quinn, Jerry** DELETE
NAME: **STEINER, BARBARA**
STREET ADDRESS: **9100 W BAY HARBOR DRIVE 10BW**
CITY-ST-ZIP: **BAY HARBOR ISLAND FL 33154** *Director*

3.1 TITLE: Change Addition
3.2 NAME: **Terry Quintan**
3.3 STREET ADDRESS: **9100 W. Bay Harbor Dr.**
3.4 CITY-ST-ZIP: **Bay Harbor Islands FL 33154**

TITLE: **LEPOUREAU, PIERRE L** DELETE
NAME: **LEPOUREAU, PIERRE L**
STREET ADDRESS: **9100 W BAY HARBOR DRIVE 2BW**
CITY-ST-ZIP: **BAY HARBOR ISLAND FL 33154**

4.1 TITLE: Change Addition
4.2 NAME:
4.3 STREET ADDRESS: **400001784464**
4.4 CITY-ST-ZIP: **-04/17/96--01093--007**

TITLE: **OSIAS, BETTY** DELETE
NAME: **OSIAS, BETTY**
STREET ADDRESS: **9100 W BAY HARBOR DRIVE 5DW**
CITY-ST-ZIP: **BAY HARBOR ISLAND FL 33154**

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

TITLE: DELETE
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

6.1 TITLE: Change Addition
6.2 NAME:
6.3 STREET ADDRESS:
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: **STEARNS, MYRTLE** *Myrtle W. Stearns*

Date: **3/12/96** (305) 965-0451

CR2E037 (12/95)