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Apr 16 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **721268** (1)
1. Corporation Name
COLONIAL CLUB CONDOMINIUM ASSOC. SEC 1, INC.

Principal Place of Business 26 COLONIAL CLUB DRIVE BOYNTON BEACH FL 33435 US	Mailing Address %BEACON PROPERTY MGT 500 E SPANISH RIVER BLVD. 18 BOCA RATON FL 33431 US
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3. Date Incorporated or Qualified 06/30/1971	
4. FEI Number 59-1534387	Applied For <input type="checkbox"/> Not Applicable

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 500 NE Spanish River Blvd. 27 Suite, Apt. #, etc. 28 18 29 City & State 30 Zip 31 Country
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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
7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input type="checkbox"/> No
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No

9. Name and Address of Current Registered Agent
**WILLIS, ERNEST W
%BEACON PROPERTY MGT INC
500 E SPANISH RIVER BLVD , 18
BOCA RATON FL 33462**

10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 500 NE Spanish River Blvd., Ste. 18 83 84 City Boca Raton 85 Zip Code FL 33431

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	
TITLE	<input type="checkbox"/> DELETE
NAME	PD HENRY, KEITH
STREET ADDRESS	5 COLONIAL CLUB DR #101
CITY-ST-ZIP	BOYNTON BEACH FL 33435
TITLE	<input type="checkbox"/> DELETE
NAME	PD DOHERTY, JOHN
STREET ADDRESS	20 COLONIAL CLUB DR #104
CITY-ST-ZIP	BOYNTON BEACH FL
TITLE	<input type="checkbox"/> DELETE
NAME	VD MEYER, MARGARET
STREET ADDRESS	11 COLONIAL CLUB DRIVE #100
CITY-ST-ZIP	BOYNTON BEACH FL 33435
TITLE	<input checked="" type="checkbox"/> DELETE
NAME	D BATTITO, JOSEPH
STREET ADDRESS	30 COLONIAL CLUB DR #100
CITY-ST-ZIP	BOYNTON BEACH FL
TITLE	<input type="checkbox"/> DELETE
NAME	PD BOYLE, MARGARET
STREET ADDRESS	19 COLONIAL CLUB DR #200
CITY-ST-ZIP	BOYNTON BEACH FL 33435
TITLE	<input checked="" type="checkbox"/> DELETE
NAME	SD KYRK, KEN
STREET ADDRESS	35 COLONIAL CLUB DR, 205
CITY-ST-ZIP	BOYNTON BCH FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	D Masterman, Jill
1.3 STREET ADDRESS	#9-101 Colonial Club Drive
1.4 CITY-ST-ZIP	Boynton Beach, FL
2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	S/D JOHN DOHERTY
2.3 STREET ADDRESS	20 COLONIAL CLUB DR #104
2.4 CITY-ST-ZIP	BOYNTON BEACH FL 33435
3.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	T/D Rita Strunks
3.3 STREET ADDRESS	7 Colonial Club Drive #303
3.4 CITY-ST-ZIP	Boynton Beach, FL
4.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.2 NAME	D RICHARD PRATT
4.3 STREET ADDRESS	38 COLONIAL CLUB DR. #101
4.4 CITY-ST-ZIP	BOYNTON BEACH FL 33435
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I 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.

SIGNATURE: *Keith Henry*

April 9, 1998 561-750-0040

CR2E037 (10/97)