

**FILE NOW: FILING FEE IS \$61.25**

**FILED**

**Apr 06 1998 8:00am  
Secretary of State**

NONPROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
---	---	---

**DOCUMENT # 725984 (9)**  
1. Corporation Name  
**MAI KAI CONDOMINIUM ASSOCIATION, INC.**



Principal Place of Business <b>1935 S. CONWAY RD. ORLANDO FL 32812 US</b>	Mailing Address <b>1935 S. CONWAY RD. ORLANDO FL 32812 US</b>
--	--

3. Date Incorporated or Qualified <b>04/03/1973</b>		
4. FEI Number <b>59-1579078</b>	Applied For <input type="checkbox"/>	Not Applicable <input checked="" type="checkbox"/>

2. Principal Place of Business <b>21 1935 S. CONWAY ROAD</b> Suite, Apt. #, etc.	2a. Mailing Address <b>26 SAME</b> Suite, Apt. #, etc.
22 City & State <b>23 ORLANDO, FLORIDA</b>	27 City & State
24 Zip <b>32812</b>	25 Country <b>USA</b>
28 Zip	29 Country
30	

5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00 May Be Added to Fees</b>
7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input checked="" 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 checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent  
**CARROLL, JOHN T.  
1935 S CONWAY RD  
I-1  
ORLANDO FL 32812**

10. Name and Address of New Registered Agent  
**81 Name  
JEAN A. GERTENBACH  
82 Street Address (P.O. Box Number is Not Acceptable)  
1935 S. CONWAY RD., E-6  
83  
84 City  
ORLANDO  
85 Zip Code  
FL 32812**

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 *Jean A. Gertenbach* **JEAN A. GERTENBACH, PRESIDENT** **3/30/98**  
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 <b>DP</b>	<input type="checkbox"/> DELETE	1.1 TITLE <b>VPD</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME <b>GERTENBACH, JEAN</b>		1.2 NAME <b>DOROTHY E. NeSMITH</b>	
STREET ADDRESS <b>1935 S. CONWAY RD., E-6</b>		1.3 STREET ADDRESS <b>1935 S. CONWAY RD., I-2</b>	
CITY-ST-ZIP <b>ORLANDO FL</b>		1.4 CITY-ST-ZIP <b>ORLANDO, FL 32812</b>	
TITLE <b>PD</b>	<input checked="" type="checkbox"/> DELETE	2.1 TITLE <b>TD</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME <b>CARROLL, JOHN T</b>		2.2 NAME <b>JOHN G. SPERLING</b>	
STREET ADDRESS <b>1935 S CONWAY RD., I-1</b>		2.3 STREET ADDRESS <b>1935 S. CONWAY RD., H-5</b>	
CITY-ST-ZIP <b>ORLANDO FL</b>		2.4 CITY-ST-ZIP <b>ORLANDO, FL 32812</b>	
TITLE <b>SD</b>	<input checked="" type="checkbox"/> DELETE	3.1 TITLE <b>SD</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME <b>SALTMAN, MICHAEL L.</b>		3.2 NAME <b>WILLIAM B. SHARP</b>	
STREET ADDRESS <b>1935 S CONWAY ROAD #R-2</b>		3.3 STREET ADDRESS <b>1935 S. CONWAY RD., S-6</b>	
CITY-ST-ZIP <b>ORLANDO FL</b>		3.4 CITY-ST-ZIP <b>ORLANDO, FL 32812</b>	
TITLE <b>VP</b>	<input checked="" type="checkbox"/> DELETE	4.1 TITLE <b>D</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME <b>BERNOR, RUTH</b>		4.2 NAME <b>MAURICE R. PEARSALL</b>	
STREET ADDRESS <b>1935 S CONWAY RD., G-7</b>		4.3 STREET ADDRESS <b>1935 S. CONWAY RD., A-1</b>	
CITY-ST-ZIP <b>ORLANDO FL</b>		4.4 CITY-ST-ZIP <b>ORLANDO, FL 32812</b>	
TITLE <b>T</b>	<input checked="" type="checkbox"/> DELETE	5.1 TITLE <b>D</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME <b>CLARKE, GORDON</b>		5.2 NAME <b>BETTY J. SMITH</b>	
STREET ADDRESS <b>1935 S. CONWAY RD., C-2</b>		5.3 STREET ADDRESS <b>1935 S. CONWAY RD., E-2</b>	
CITY-ST-ZIP <b>ORLANDO FL</b>		5.4 CITY-ST-ZIP <b>ORLANDO, FL 32812</b>	
TITLE <b>D</b>	<input checked="" type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME <b>BURKHART, JOYCE</b>		6.2 NAME	
STREET ADDRESS <b>1935 S CONWAY RD A-2</b>		6.3 STREET ADDRESS	
CITY-ST-ZIP <b>ORLANDO FL</b>		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: *Jean A. Gertenbach* JEAN A. GERTENBACH, PRESIDENT 3/30/98 407 249-1897**

CRE037 (10/97)