FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



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

	1996
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DOCUMENT #
1. Corporation Name 730111

LA CANCHA CONDOMINIUM ASSOCIATION, INC.

C/1 C/1						1184 A15H 818H 818H 818H 818H 186
Principal Place	of Business	Mailing Address				BARRA BURNA BURNA BURNA BARRA BURNA BURNA
615 N.E. 12TI		615 N.E. 12TH AVENUE				
	ALE FL 33304	FT. LAUDERDALE FL 3				
					3. Date Incorporated or Qualified	3a. Date of Last Report
					07/01/1974	03/23/1995
2. Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number	Applied For
21		26			59-1652032	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional
City & State		City & State			S. Flashar Organiza Financia	Fee Required
23	,	28			6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zιρ	Country	Zip	Countr	/	8. This corporation has liability for intan	
24	25	29	30			Yes No
	9. Name and Address of Currer	nt Registered Agent			10. Name and Address of New Regis	itered Agent
			81	Name		
LIGHT, H			82	Street	Address (P.O. Box Number is Not Acceptable)	
	12TH AVE					
FI. LAUI	DERDALE FL 33304		83			
			84	City		FL 85 Zip Code
11. Pursuant t	to the provisions of Sections 617 0502	and 617 1508. Florida Statut	es the above	named c	corporation submits this statement for the purpose	
or register	red agent, or both, in the State of Florid th, and accept the obligations of, Sect	da. Such change was authoriz	ed by the con	oration's	s board of directors. I hereby accept the appointment	nent as registered agent. I am
	in, and accept the boligations of, sect	ion 617.0000, Fiorida Statutes	i.			
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable (NC)1E Registered Age	nt signature	required wher: reinstating)	DATE
12.	OFFICERS AN		13.		ADDITIONS/CHANGES TO OFFICER	IS AND DIRECTORS IN 12
TITLE	D .	DELETE	1.1 TITLE			Change Addition
NAME	HOWELL, NANCY		1.2 NAME			
STREET ADDRESS	615 NE 12TH AVE		1.3 STREE	ADDRESS		
CITY-ST-ZIP	FT LAUDERDALE, FL 00000 SDT	5300.04 6	1.4 CITY-	ST - ZIP		
TITLE	LIGHT, HARRY	DELETE	2 1 TITLE			Change Addition
NAME	615 NE 12TH AVE		22 NAME			
STREET ADDRESS	FT LAUDERDALE, FL 00000			ADDRESS		
CITY-ST-ZIP TITLE	DAS	DELETE	2 4 CITY - 3 1 TOTLE	S1-ZIP		Change Addition
NAME	GRIFIN, NANCY		3.2 NAME			C Briange C Addition
STREET ADDRESS	615 12THAVE			ADDRESS		
CITY-ST-ZIP	FT LAUD,FL 00000		3 4. CITY -			
TITLE	PD	DELETE	4 1 TITLE			Change Addition
NAME	Sader, Robert		4. 2 NAME			
STREET ADDRESS	615 NE 12TH AVE		4.3 STREE	ADDRESS		
CITY-ST-ZIP	FT LAUDERDALE, FL 00000		4.4 CITY-	ST-ZIP		
TITLE	VD	DELETE	51 TITLE		VD WE MAG	Change Addition
NAME	ALLEN, JOHN		5 2 NAME		BAIKE, MIKE	
STREET ADDRESS	615 NE 12TH AVE	•	5.3 STREE	ADDRESS	BAJKE, MIKE 615 NE 12 Ave FT LANDEZ dale FL333	
CITY-ST-ZIP	FT LAUDERDALE, FL 00000	Fine exc	5 4 CITY -	ST-ZIP	TT LANDEL ONLE TL 3330	34
TITLE		DELETE	61 TITLE			Change Addition
NAME STORES LOOPESO			6.2 NAME			
STREET ADDRESS				ADDRESS		
CITY - ST - ZIP			6 4 CITY -	ST-21P		

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: STONE TURE AND TYPED OF PRIVED RAME OF SIGNING OFFICER OR DIRECTOR