

FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # 730644 (2)
1. Corporation Name
SAN REMO TOWNHOUSES CONDOMINIUM ASSOCIATION, INC



Principal Place of Business Mailing Address
1000 OCEAN DRIVE **1000 OCEAN DRIVE**
JUNO BEACH FL 33408 **JUNO BEACH FL 33408**

3. Date Incorporated or Qualified: **09/11/1974** 3a. Date of Last Report: **04/12/1995**
4. FEI Number: **65-0094148** 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

2. Principal Place of Business 2a. Mailing Address
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.
22 City & State 27 City & State
23 Zip 28 Country
24 Zip 25 Country 29 Zip 30 Country

9. Name and Address of Current Registered Agent
KENWALL, KENNETH D.
1000 OCEAN DRIVE
JUNO BEACH FL 33408

10. Name and Address of New Registered Agent
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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD KENWALL, KENNETH D. <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	1000 OCEAN DRIVE	1.2 NAME	
STREET ADDRESS	JUNO BEACH FL	1.3 STREET ADDRESS	
CITY-ST-ZIP		1.4 CITY-ST-ZIP	
TITLE	VD TEACHMAN, MARY J. <input checked="" type="checkbox"/> DELETE	2.1 TITLE	VD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	1008 OCEAN DRIVE	2.2 NAME	MARY J. TEACHMAN
STREET ADDRESS	JUNO BEACH FL	2.3 STREET ADDRESS	5503 SHORE DRIVE
CITY-ST-ZIP		2.4 CITY-ST-ZIP	ORCHARD LAKE VILLAGE, MI 48324
TITLE	STD ANDERSON, DONALD <input checked="" type="checkbox"/> DELETE	3.1 TITLE	SD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	1006 OCEAN DR.	3.2 NAME	GERARD TEACHMAN
STREET ADDRESS	JUNO BEACH FL	3.3 STREET ADDRESS	5503 SHORE DRIVE
CITY-ST-ZIP		3.4 CITY-ST-ZIP	ORCHARD LAKE VILLAGE, MI 48324
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	TD <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		4.2 NAME	SHERYL BROWN
STREET ADDRESS		4.3 STREET ADDRESS	40.5 NO. MILITARY TRAIL
CITY-ST-ZIP		4.4 CITY-ST-ZIP	WEST PALM BEACH, FL 33415
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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: Kenneth D. Kenwall, Pres. Date: 407-627-3135 Daytime Phone #

CR2E037 (12/95)