


FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT 1996		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 745635 (3)
 1. Corporation Name
CRANE CREEK PROPERTY OWNERS' ASSOCIATION, INC.



Principal Place of Business P O BOX 651 PALM CITY FL 34990	Mailing Address P O BOX 651 PALM CITY FL 34990
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2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified 01/19/1979	3a. Date of Last Report 03/24/1995
21. Suite, Apt. #, etc.	26. Suite, Apt. #, etc.	4. FEI Number 59-1898734	Applied For Not Applicable
22. City & State	27. City & State	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
23. Zip	28. Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
24. Country	29. Country	30. Country	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No

9. Name and Address of Current Registered Agent
 INGLIS, STEVE
 C/O BRISTOL MANAGEMENT
 103 SO US HWY 1 F5-135
 JUPITER FL 33477

10. Name and Address of New Registered Agent

81. Name	85. Zip Code
82. Street Address (P.O. Box Number is Not Acceptable)	
83.	
84. City	

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 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)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D SHeldon, HOWARD <input checked="" type="checkbox"/> DELETE	1.1 TITLE	S/D MC GREGOR, CHRISTEL <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	2000 SW RACQUET CLUB DR	1.2 NAME	2311 SW RACQUET CLUB DR.
STREET ADDRESS	PALM CITY FL	1.3 STREET ADDRESS	PALM CITY FL 34990
CITY-ST-ZIP		1.4 CITY-ST-ZIP	
TITLE	ST VAN HOFF, JON <input checked="" type="checkbox"/> DELETE	2.1 TITLE	LOVELAND, JOAN T/D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	1959 SW WINNERS CIR	2.2 NAME	3034 SW WIMBLEDON TERRACE
STREET ADDRESS	PALM CITY FL	2.3 STREET ADDRESS	PALM CITY, FL 34990
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	D BRYAN, JACK <input checked="" type="checkbox"/> DELETE	3.1 TITLE	RILEY, BART D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	1924 SW ST. ANDREWS DR.	3.2 NAME	3034 SW WIMBLEDON TERRACE
STREET ADDRESS	PALM CITY FL	3.3 STREET ADDRESS	PALM CITY, FL 34990
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	VP GRISWOLD, KAREN <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	1793 SW CRANE CRK AVE	4.2 NAME	
STREET ADDRESS	PALM CITY FL	4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	P LEE, FRANK <input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	3612 SW MASHIE COURT	5.2 NAME	
STREET ADDRESS	PALM CITY FL	5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	D PACKER, W.W. <input checked="" type="checkbox"/> DELETE	6.1 TITLE	KOENIG, PAUL D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	2401 SW RACQUET CLUB	6.2 NAME	1575 SW ST. ANDREWS DR.
STREET ADDRESS	PALM CITY FL	6.3 STREET ADDRESS	PALM CITY, FL 34990
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 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: _____
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-9-96 407-288-7255

CR2E037 (12/95)