

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

DOCUMENT # 746156 (9)
1. Corporation Name

CORAL REEF CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business: 4017 S.E. 19TH PLACE, CAPE CORAL FL 33904
Mailing Address: 4017 S.E. 19TH PLACE, CAPE CORAL FL 33904

3. Date Incorporated or Qualified: 03/07/1979
3a. Date of Last Report: 04/03/1995

2. Principal Place of Business (21-24) and 2a. Mailing Address (25-29) fields.

4. FEI Number: 59-2255259
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

9. Name and Address of Current Registered Agent: HEISLER, DONALD A., 4023 SE 19TH PLACE #108, CAPE CORAL FL 33904

10. Name and Address of New Registered Agent (81-85): FRANK GIORDANO, 4021 SE 19th PLACE, UNIT #205, CAPE CORAL FL 33904

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: FRANK GIORDANO SECRETARY-TREASURER [Signature] 13 JAN 96
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when re-instating) DATE

12. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> DELETE
NAME	BOSWORTH, ROGER	
STREET ADDRESS	4023 SE 19TH PL	
CITY-ST-ZIP	CAPE CORAL FL	
TITLE	STD	<input type="checkbox"/> DELETE
NAME	GIORDANO, FRANK	
STREET ADDRESS	4021 SE 19TH PL	
CITY-ST-ZIP	CAPE CORAL FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	HARBORN, MARY	
STREET ADDRESS	4013 SE 19TH PL	
CITY-ST-ZIP	CAPE CORAL, FL 00000	
TITLE	VD	<input type="checkbox"/> DELETE
NAME	SCHUMACHER, HARRY	
STREET ADDRESS	4025 SE 19TH PL	
CITY-ST-ZIP	CAPE CORAL FL	
TITLE	PD	<input type="checkbox"/> DELETE
NAME	HEISLER, DONALD	
STREET ADDRESS	4023 SE 19TH PL	
CITY-ST-ZIP	CAPE CORAL FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS-CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY-ST-ZIP		
2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE	PD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	SAME	
4.3 STREET ADDRESS	SAME	
4.4 CITY-ST-ZIP	SAME	
5.1 TITLE	VD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	SAME	
5.3 STREET ADDRESS	SAME	
5.4 CITY-ST-ZIP	SAME	
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 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: FRANK GIORDANO [Signature] 13 JAN 96 941-540-0186
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (12/95)