FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997
DOCUMENT #

746268

(2)

LANDMARK PLAZA OFFICE CONDOMINIUM ASSOCIATION, I

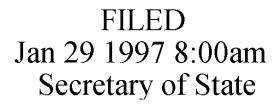
400 E MERRITT AVE SUITE A MERRITT ISLAND FL 32853-0492

Principal Place of Business

Mailing Address

400 E MERRITT AVE SUITE A

MERRITT ISLAND FL 32953-3434





3a. Date of Last Report 03/06/1996

 Date Incorporated or Qualified 03/16/1979

2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number 59-2139006			plied For	
21		26				59-2139006		No	t Applicable	
Suite, Apt.	#, etc.	 	Suite, Apt. #, etc.			5. Certificate of Status Desired		\$8.75		
22		27						Fee Re	quired	
City & State	City & State	City & State			6. Election Campaign Financing		\$5.00	May Be		
23		28				Trust Fund Contribution		Added t	lo Fees	
Zip	Country	Zip		Country		8. This corporation has liability for i	. · -	-	. 199.032,	
24	25		Florida Statutes							
*	9. Name and Address of Curren	Registered Agent		104		10. Name and Address of New Re	gistered A	gent		
				81	Name					
LEWIS, PAUL 400 E. MERRITT AVENUET AVE					82 Street Address (P.O. Box Number is Not Acceptable)					
SUITE A										
MERRITT ISLAND FL 32953-0492					City			85 Zip (Code	
				84	Oity		FL	65 Zip \	2000	
11. Pursuant	to the provisions of Sections 617.0502	and 617.1508, Flor	ida Statutes, t	he above	-named corp	poration submits this statement for the p	urpose of	changing it	s registered	
office or n	egistered agent, or both, in the State m familiar with, and accept the obliga	of Florida. Such cha tions of Section 617	nge was autho 7.0503. Florida	orized by Statutes	the corporat	ion's board of directors. I hereby accep	ot the appo	pintment as	registered	
	The land with and accept the conge		.0000, 1101100	Cidiolog	•					
SIGNATURE .	Signature, typed or printed name of registered ager	it and title if applicable.	(NOTE: Rec	jislered Age	nt signature requir	red when reinstating)	DATE			
12.	OFFICERS AND	DIRECTORS		13.		ADDITIONS/CHANGES TO OFFIC	ERS AND	DIRECTOR	IS IN 12	
TITLE	SD	1	DELETE	1.1 TITLE				Change	Addition	
NAME	CHURCH, CHARLES WILLIAM			1.2 NAME						
STREET ADDRESS	400 E. MERRITT AVE. #B			1.3 STREET	ADDRESS					
CITY-ST-ZIP	MERRITT ISLAND FL			1.4 CITY-S						
TITLE	PD		DELETE	21 TITLE	1-20		·	Change	Addition	
NAME	MANDATE, TONY			2.2 NAME	1					
STREET ADDRESS	400 E MERRITT AVE C			2.3 STREET	ADDOCCC					
CITY-ST-ZIP	MERRITT ISLAND FL			2.4 CITY-S						
TITLE	VD	П	DELETE	3.1 TITLE	1- 211	······································		Change	Addition	
NAME	MILLIKEN, ROBERT			3.2 NAME						
STREET ADDRESS	400 E. MERRITT AVE. #F			3.3 STREET	40000ccc					
1	MERRITT ISLAND FL		1		1					
CITY-ST-ZIP TITLE	TO		DELETE	3.4. CITY-S 4.1 TITLE	51 - ZIP			Change	Addition	
NAME	LEWIS, PAUL		JEEC (C	4. 2 NAME				Orango	L. J Addition	
STREET ADDRESS	400 E. MERRITT AVE. #A				1DDOCEC					
	MERRITT ISLAND FL			4.3 STREET	1					
CITY-ST-ZIP	MENNITI IOCANO I L		DELETE	4.4 CITY- S	T- ZIP			Change	Addition	
TITLE		L	/LLLIL	5.1 TITLE				cuange	L.J AUGINON	
NAME			ľ	5.2 NAME						
STREET ADDRESS				53 STREET	i					
CITY-ST-ZIP				54 CITY-S	T- ZIP					
TITLE		الا	DELETE	6.1 TITLE				L Change	Addition	
NAME			Į	6.2 NAME	-					
STREET ADDRESS				6.3 STREET	ADDRESS					
CITY-ST-ZIP				6.4 CITY - S						
14. I do heret	by certify that the information supplied	with this filing does	not qualify fo	r the exe	mption stated	in Section 119.07(3)(i), Florida Statute	. I further	certify that	the	
iniformatio	in marcared on this annual report of s fficer or director of the corporation or	applemental annual the receiver or trusti	ee empowered	and accu d to exec	rate and that ute this repor	I my signature shall have the same lega it as required by Chapter 617, Florida S	i ettect as tatutes; ar	ii made und nd that my r	uer oath; tha iame	
appears i	n Block 12 or Block 13 if obtainged, or	op an attachment w	an addres	5/				· something of		
	Maria M	////	/. V	/a						