

FILE NOW: FILING FEE IS \$61.25

FILED

Apr 02 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
---------------------------------------------------------------------	-----------------------------------------------------------------------------------	------------------------------------------------------------------------------------------------------------------

DOCUMENT # 749327 (3)
 1. Corporation Name
HIDDEN BANYAN CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business 1202 S LAKE DR LANTANA FL 33462 US	Mailing Address 1202 S LAKE DR LANTANA FL 33462-6501 US
----------------------------------------------------------------------------------	---------------------------------------------------------------------------

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country		2a. Mailing Address 25 Suite, Apt. #, etc. 26 City & State 27 Zip 28 Country		3. Date Incorporated or Qualified 10/16/1979	3a. Date of Last Report 04/22/1996
4. FEI Number 59-2155932		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
7. 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 DINUNZIO, MAXINE 1202 S. LAKE DRIVE #202 LANTANA FL 33462				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 D <input checked="" type="checkbox"/> DELETE NAME ELLINGHAM, ANN STREET ADDRESS 1202 S. LAKE DRIVE #201 CITY-ST-ZIP LANTANA, FL 00000	1.1 TITLE TD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 1.2 NAME MECCA, PETER L. 1.3 STREET ADDRESS 1202 S. LAKE DRIVE #403 1.4 CITY-ST-ZIP LANTANA, FL 33462	TITLE PD <input type="checkbox"/> DELETE NAME DINUNZIO, MAXINE STREET ADDRESS 1202 S. LAKE DRIVE #202 CITY-ST-ZIP LANTANA, FL 00000	2.1 TITLE SD <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 2.2 NAME LINKE, WILLIAM 2.3 STREET ADDRESS 1202 S. LAKE DRIVE #303 2.4 CITY-ST-ZIP LANTANA, FL 33462
TITLE SD <input checked="" type="checkbox"/> DELETE NAME GOOTENBERG, IRWIN STREET ADDRESS 1202 S LAKE DRIVE #505 CITY-ST-ZIP LANTANA, FL 00000	3.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	TITLE TD <input checked="" type="checkbox"/> DELETE NAME HARONITIS, DIMITRIS STREET ADDRESS 1202 S LAKE DRIVE #502 CITY-ST-ZIP LANTANA, FL 00000	4.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP
TITLE D <input checked="" type="checkbox"/> DELETE NAME KILBY, LOUISE STREET ADDRESS 1202 S LAKE DR S404 CITY-ST-ZIP LANTANA, FL 00000	5.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	TITLE VD <input type="checkbox"/> DELETE NAME MECCA, PETER L STREET ADDRESS 1202 S LAKE DRIVE, #403 CITY-ST-ZIP LANTANA FL	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 does not qualify for the exemption stated in Section 119.07(3)(i), 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: MAXINE DINUNZIO 3/5/97 561 596 6890

CR2E037 (9/96)