


FILE NOW: FILING FEE IS \$61.25

FILED

Feb 28 1997 8:00am
Secretary of State

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

DOCUMENT # 754625 (2)
1. Corporation Name
EL CONQUISTADOR NEIGHBORHOOD ASSOCIATION, INC.



Principal Place of Business 4005 AVENIDA MADERA BRADENTON FL 34210	Mailing Address 4005 AVENIDA MADERA BRADENTON FL 34210-3736
--	---

3. Date Incorporated or Qualified 10/13/1980	3a. Date of Last Report 01/25/1996
4. FEI Number 59-2043095	Applied For <input type="checkbox"/> Not Applicable
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
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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 Country	28 Zip Country
24	29
25	30

9. Name and Address of Current Registered Agent
**ROBBINS, CHARLES E.
4005 AVENIDA MADERA
BRADENTON FL 34210**

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

TITLE	TD	<input checked="" type="checkbox"/> DELETE
NAME	RICHARDSON, GEORGE	
STREET ADDRESS	3619 QUAIL HOLLOW PL	
CITY - ST - ZIP	BRADENTON, FL 00000	
TITLE	PD	<input type="checkbox"/> DELETE
NAME	ROBBINS, CHARLES	
STREET ADDRESS	4005 AVENIDA MADERA	
CITY - ST - ZIP	BRADENTON, FL 00000	
TITLE	D	<input type="checkbox"/> DELETE
NAME	HOLLOWAY, EARL	
STREET ADDRESS	6408 MEADOWLARK LN	
CITY - ST - ZIP	BRADENTON, FL 00000	
TITLE	SD	<input checked="" type="checkbox"/> DELETE
NAME	WITHERS, WILLIAM	
STREET ADDRESS	6416 WOOD OWL CIR	
CITY - ST - ZIP	BRADENTON, FL 00000	
TITLE	D	<input type="checkbox"/> DELETE
NAME	GREENWALD, CAROL	
STREET ADDRESS	6430 SUN EAGLE LN #205	
CITY - ST - ZIP	BRADENTON FL	
TITLE	VPD	<input type="checkbox"/> DELETE
NAME	FIEDLER, JACK	
STREET ADDRESS	5915 LA VISTA DR	
CITY - ST - ZIP	BRADENTON FL	

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	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
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: _____ DATE: **2/19/97**

CR2E037 (9/96)