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NONPROFIT **CORPORATION** ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State

	1996					I				
DOCUI	MENT #	756394	· (;	3)						
, , , , , , , , , , , , , , , , , , , ,	MN VILLAGE CO	ONDOMINIUM	ASSOCIATION	I. INC.						
	·						 		II AKAM AKAM AH	
Principal Place	e of Business		Mailing Address	i						
329 PAULS D	DRIVE		329 PAULS DE	RIVE						
- POST OFFICE	E BUX 2241		-POST OFFICE	BOX 2241						
Brandon Fl US	£ 33511		BRANDON FL US	33511		3.	Pate Incorporated or Qualit	fied 3a	. Date of Las	l Benort
							02/16/1981		05/01/	
2. Principal Pla 329	lace of Business PAULS	DR.	2a. Mailing Addr	ess Pa	ULS DR	4 . F	El Number 59-2506034	· · · · · · · · · · · · · · · · · · ·		Applied For
Suite, Apt.		<u>ν</u> ~.	Suite, Apt. #					 	\$8.7	Not Applicable 5 Additional
2			27			5 . C	Pertificate of Status Desired	d 🔲	•	Required
City & State	GNDON, F	7.	City & State	ממשני	FL		lection Campaign Financir	ng 🗆		00 May Be
Zip .	· · · · ·	untry	Zip	ا المالات	Country		rust Fund Contribution			d to Fees
. <i>3</i> 35	5// 25	USA	29 335	5//	30 USA		his corporation has liability Iorida Statutes	tor intangib Yes	ie tax under s No	. 199,032,
	9. Name and Ad	ddress of Current I	Registered Agent			10. N	lame and Address of Ne	_	•	····
A					81 Name					
	N, JOHN E.				82 Street	Address (P.O.	Box Number is Not Acce	ptable)		
	JLS DRIVE ON FL 33511				83					
DRANDO	JN FL 33511				63					
					84 City			E	85 Z	p Code
	to the provisions of S	2	. 1647.1500.51.1.						L.	
Pursuant t	to the provisions of e	sections 617.0502 ar	ng 617.1508, Florida	a Statutes,	the above named c	orporation sub	mits this statement for the	purpose of	changing its i	recistered offic
					the above named o by the corporation's	orporation sub board of direc	mits this statement for the ctors. I hereby accept the	purpose of appointmen	changing its t as registered	registered offic 1 agent. I am
familiar wit	red agent, or both, in ith, and accept the of				the above named or by the corporation's	orporation sub board of direc	mits this statement for the ctors. I hereby accept the	purpose of appointmen	changing its it as registered	registered offic I agent. I am
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John E Sillivan Trens 3-20-96 (813) (81-3480

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED WHATE OF SIGNING OFFICER OR DIRECTOR