CORPORATION ANNUAL REPORT 1996	Sand Sec	TER AUGUST 7, 1996. IT DUE TO REINSTATE: \$236 PARTMENT OF STATE Ora B Mortham Interestary of State OF CORPORATIONS		
DOCUMENT # 757445	(2)			
PUNTA RASSA CONDO	OMINIUM ASSOCIA	ATION, INC.		
Principal Place of Business	Mailing Address			
15010 Punta Rassa F Ft. Myers, FL 33908		oour Pt Dr,# , FL 33908	100	
2. Principal Place of Business	2s Maileo Adda		3. Date Incorporated or Qualified 04/07/1981	3a. Date of Last Report 01/11/1995
	2a. Mailing Address		4. FEI Number	Applied For
Suite, Apt. #, etc.	Suite, Apt. #, etc		59-2274377 5. Certificate of Status Desired	Not Applicable \$8.75 Additional
City & State	City & State			Fee Required
Zip Country	26		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
25	Zip 29	Country 30	This corporation has liability for Florida Statutes	intangible tax under s. 199 032.
9. Name and Address of Cu	urrent Registered Agent		10. Name and Address of New Re	Yes No
Joseph Adams		81 Name		
Becker & Poliakoff,	P.A.	82 Street Add	dress (P.O. Box Number is Not Acceptat	ole)
13515 Bell Tower Dr	Suite 101	83		
Ft. Myers, FL 3390		84 City		
				66 7:5 C+-1.
Pursuant to the provisions of Sections 617.	.0502 and 617 1508, Florida Stat	utes the above-named cor	rootation automical	FL 85 Zip Code
Pursuant to the provisions of Sections 617 office or registered agent, or both, in the Sagent. I am familiar with, and accept the or a section of the s	.0502 and 617 1508, Florida Stat state of Florida Such change wa bligations of Section 617.0503.	utes, the above-named cors s authorized by the corpora Florida Statutes	rporation submits this statement for the pation's board of directors. Thereby accept	
GNATURE CO	engations of, Section 617.0503,	riorida Statutes	a sala molosy doccy	
GNATURE Signature: typed or printed hame of registers. OFFICERS	engations of, Section 617.0503,	utes the above-named cors authorized by the corporal Florida Statutes OIE Registered Agent signature requirements.	pred when reinstating)	Durpose of changing its registered of the appointment as registered
GNATURE Signature: typed or printed name of registeres OFFICERS LE DP	diagent and title if applicable (NI	FIOrida Statutes OTE: Registered Agent signature requ	a sala molosy doccy	Durpose of changing its registered of the appointment as registered
GNATURE Signature typed or proted name of registers OFFICERS LE DP ME Potter, Reid	d agent and little if applicable (NI AND DIRECTORS DELETE	DIE Registered Agent signature required 13. 11 Title 12 NAME	pred when reinstating)	DATE DATE
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