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Apr 30 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 # 761927 (3)

1. Corporation Name

NEPTUNE HOLLYWOOD BEACH CLUB CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

Mailing Address

2012 N. SURF ROAD
HOLLYWOOD FL 33019

2012 N. SURF ROAD
HOLLYWOOD FL 33019-3423



3. Date Incorporated or Qualified
02/11/1982

3a. Date of Last Report
04/22/1996

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

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

POLIAKOFF, GARY
BECKER, POLIAKOFF, & STREITFELD
3111 STIRLING RD.
FT. LAUDERDALE FL 33310

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE P
NAME SAMPSON, BARBARA,
STREET ADDRESS 7630 KISMET ST.
CITY-ST-ZIP MIRAMAR FL 33023

TITLE VP
NAME STANG, ALAN,
STREET ADDRESS 8197 SW 185TH ST.
CITY-ST-ZIP MIAMI FL 33157

TITLE ST
NAME SPARROW, JACQUELINE,
STREET ADDRESS 7191 SHALIMAR ST.
CITY-ST-ZIP MIRAMAR FL 33023

TITLE D
NAME MILLER, DONALD,
STREET ADDRESS 1601 SW 88TH AVE.
CITY-ST-ZIP MIAMI FL 33165

TITLE D
NAME JOYNT, JOSEPH
STREET ADDRESS 309 CAROLINA ST.
CITY-ST-ZIP HOLLYWOOD FL 33019

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE D
1.2 NAME DAVID DEGRANGE
1.3 STREET ADDRESS 710 SHILO TERRACE
1.4 CITY-ST-ZIP DANIA, FL 33325

2.1 TITLE VP
2.2 NAME STANG, ALAN
2.3 STREET ADDRESS 1585 DAYTONIA RD.
2.4 CITY-ST-ZIP MIAMI BCH, FLA. 33141

3.1 TITLE
3.2 NAME MAE MANOULA
3.3 STREET ADDRESS 950 HILLCREST DR. #108
3.4 CITY-ST-ZIP HOLLYWOOD FL 33021

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
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: Jacqueline Sparrow
SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/21/97
Date

Daytime Phone # 0023471

CR2E037 (9/96)