

FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham,
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **763472** (8)

1. Corporation Name
THE PEACHTREE BUILDING CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business Mailing Address
425 WEST COLONIAL DRIVE, SUITE 308 ORLANDO FL 32804

3. Date Incorporated or Qualified **05/28/1982** 3a. Date of Last Report **05/01/1995**
4. FEI Number **59-2998306** Applied For Not Applicable
5. Certificate of Status Desired **\$8.75 Additional Fee Required**
6. Election Campaign Financing Trust Fund Contribution **\$5.00 May Be Added to Fees**
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes 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 25 Country 28 Zip 29 Country 30

9. Name and Address of Current Registered Agent
**CURTIS, PAUL L
425 W COLONIAL DRIVE
ORLANDO FL 32804**

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: *Paul L Curtis* DATE: **3/21/96**

12. OFFICERS AND DIRECTORS

TITLE	VD	<input type="checkbox"/> DELETE
NAME	WATERS, PAUL W	
STREET ADDRESS	425 W COLONIAL DRIVE	
CITY-ST-ZIP	ORLANDO FL	
TITLE	DV	<input checked="" type="checkbox"/> DELETE
NAME	CURTIS, PAUL L	
STREET ADDRESS	425 W. COLONIAL DR.	
CITY-ST-ZIP	ORLANDO FL	
TITLE	DP	<input checked="" type="checkbox"/> DELETE
NAME	ANDERSON, FRANK N JR	
STREET ADDRESS	425 W COLONIAL DRIVE	
CITY-ST-ZIP	ORLANDO FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	President DP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	Waters, Paul W.	
13 STREET ADDRESS	425 W. Colonial Drive	
14 CITY-ST-ZIP	Orlando, FL 32804	
21 TITLE		<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
22 NAME		
23 STREET ADDRESS		
24 CITY-ST-ZIP		
31 TITLE		<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
32 NAME		
33 STREET ADDRESS		
34 CITY-ST-ZIP		
41 TITLE	Vice-President DV	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
42 NAME	Robert Irwin	
43 STREET ADDRESS	425 W. Colonial Drive	
44 CITY-ST-ZIP	Orlando, FL 32804	
51 TITLE	Secretary DS	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
52 NAME	Azina Kanji	
53 STREET ADDRESS	425 W. Colonial Drive	
54 CITY-ST-ZIP	Orlando, FL 32804	
61 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME		
63 STREET ADDRESS		
64 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: *Paul W. Waters* DATE: **3/21/96** 407-841-2345
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone #

CR2E037 (12/95)