

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
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DOCUMENT # 769026 (6)
 1. Corporation Name
CATALINA BEACH CLUB CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business 1303 S ATLANTIC AVE. DAYTONA BCH. FL 32118-4803	Mailing Address 1303 S ATLANTIC AVE. DAYTONA BCH. FL 32118-4803
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3. Date Incorporated or Qualified 06/21/1983		3a. Date of Last Report 06/14/1995	
21. Principal Place of Business SAME	22. Mailing Address 1303 S ATLANTIC AVE.	4. FEI Number NOT APPLICABLE	Applied For <input type="checkbox"/> Not Applicable
22. Suite, Apt. #, etc.	27. Suite, Apt. #, etc. DAYTONA	5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required
23. City & State FLORIDA	28. City & State FLORIDA	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
24. Zip 32118	25. Country USA	29. Zip 32118	30. Country USA
9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	

GANDY, BERNADETTE
1631 WOODMAR DR.
DAYTONA BCH FL 32124

81. Name	85. Zip Code
82. Street Address (P.O. Box Number is Not Acceptable)	FL
83. N/A	
84. City	

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: BERNADETTE GANDY *Bernadette Gandy President* **1-20-96**
Signature, typed or printed name of registered agent, and title, if applicable. (NOTE: Registered Agent signature required when reinstating.) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE PD	<input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME GANDY, BERNADETTE		1.2 NAME	
STREET ADDRESS 1631 WOODMAR DR.		1.3 STREET ADDRESS	700001780327
CITY-ST-ZIP PORT ORANGE FL		1.4 CITY-ST-ZIP	-04/15/96--01062--000
TITLE VPD	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME DESRIUSSEAU, ROGER		2.2 NAME	***61.25
STREET ADDRESS 803 BRIMFIELD CT		2.3 STREET ADDRESS	
CITY-ST-ZIP PT ORANGE FL		2.4 CITY-ST-ZIP	
TITLE D	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME BONAR, JAMES		3.2 NAME	
STREET ADDRESS 2805 KINGS DEER ROAD		3.3 STREET ADDRESS	500001780325
CITY-ST-ZIP WINTER PARK FL		3.4 CITY-ST-ZIP	-04/15/96--01062--000
TITLE ST	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME PALLO, GEORGE		4.2 NAME	***8.75
STREET ADDRESS 565 LANCASTER AVENUE		4.3 STREET ADDRESS	
CITY-ST-ZIP ORANGE CITY FL		4.4 CITY-ST-ZIP	
TITLE D	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME KAUFFMAN, JACK		5.2 NAME	
STREET ADDRESS 4270 CARLYSLE AVENUE		5.3 STREET ADDRESS	
CITY-ST-ZIP TITUSVILLE FL		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 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: Bernadette Gandy *Bernadette Gandy* **1-20-96** **904-253-6741**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DATE DAYTIME PHONE #

PRESIDENT

CR2E037 (12/95)

J2 4/15