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NONPROFIT CORPORATION ANNUAL REPORT



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

DOCUMENT # 769073

(8)

RIO DEL MAR CONDOMINIUM NO. TWENTY-FOUR ASSOCIAT ION INC.

Mailing Address



113 B RIO DEL MAR RD ST AUGUSTINE FL 32064		113 B RIO DEL MAR RD ST AUGUSTINE FL 32084				Date Incorporated or Qualified 06/23/1983	3a. Date of	Last R	
2. Principal Pla	aco of Business	2a. Mailing Address				4. FEI Number	1 0/1		plied For
21 Principal Fiz	ace of business	26. Withing 7 Galloss				59-2399026			ot Applicable
Suite, Apt. #	#, etc.	Suite, Apt. #, etc.				S. Certificate of Status Desired Secretary Secr			
22		27				3. Certificate of Statos Desired		Fee Re	equired
City & State		City & State				Election Campaign Financing Trust Fund Contribution			May Be to Fees
Ζιρ 24	Country 25	Zip 29	30 Cou	intry		8. This corporation has liability for in Florida Statutes	Yes X No		99.032,
	9. Name and Address of Currer	it Registered Agent				10. Name and Address of New Re	gistered Agen	<u>t</u>	
				81	Name				
JOHNSON, JOHN T JR. 113 RIO DEL MAR ROAD, UNIT B				82 Street Address (P.O. Box Number is Not Acceptable)			9)		
	USTINE FL 32084			83					
				84	City		FL 85	Zip	Code
familiär wil SIGNATURE.	th, and accept the obligations of, Sect Signature types or printed name of registered agen	ion 617.0503, Florida Statutes	S			ard of directors. I hereby accept the appo	DATE		
12.	OFFICERS AN	D DIRECTORS	13.			ADDITIONS/CHANGES TO OFFIC			
TITLE	STD	☐]DELETE	111				☐ Chi	inge	☐ Addition
NAME	JOHNSON, JOHN T JR.	_	1.2 N.						
STREET ADDRESS	113 RIO DEL MAR RO UNIT	В			ADDRESS				
CITY-ST-ZIP TITLE	ST AUGUSTINE FL 32084 PD	□ TDELETE	14U 21Ti		ST-ZIP		☐ Ch.	ange	Addition
NAME	JOHNSON, CHRISTINE		22 N						
STREET ADDRESS	113 RIO DEL MAR RD UNIT	В	235	TREET	T ADDRESS				
CITY-ST-ZIF	ST AUGUSTINE FL 32084		2 4 (HTY-	ST-ZIP				
T-TLE	D []DEFELE			ITLE			☐ Ch	ange	☐ Addition
NAME	STATON, VAN E	ī	. 32N						
STREET ADDRESS	113 RIO DEL MAR RD UNIT	A			T ADDRESS				
CITY - ST - ZIP	ST AUGUSTINE FL 32084	[]DELETE	417		ST - ZIP		☐ Ch	ange	■ Addition
NAME			4.21						
STREET ADDRESS			435	TREE	T ADDRESS				
CITY-ST-ZIP					ST-ZIP				63 4 100
TITLE		[]DELETE	51T		ļ		□ Ch	ange	Addition
NAMÉ			52 N						
STREET ADDRESS					T ADDRESS				
Crity - ST - ZrP		[]DELETE	6.11		ST-ZIP		Ch	ange	Add-tion
NAME			621					_	
STREET ADDRESS					T ADDRESS				
CITY-ST-ZIP					ST-ZIP				
	1	1 11 11 11 11 11 11 11 11 11 11 11 11				for the exemption stated in Continue 1101	07/2)/Id. Florida	Ctatute	o Lituribor

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 an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME

JOHN T JOHNSON