FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #
1. Corporation Name

769073

(8)

RIO DEL MAR CONDOMINIUM NO. TWENTY-FOUR ASSOCIAT

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Principal Place of Business Mailing Address					Libbirt ineste minim imiti batti imman inn minit dibir arari arari arari arari arari	
113 B RIO DEL ST AUGUSTINE		113 B RIO DEL MAR RD ST AUGUSTINE FL 32084-6473				
					3. Date incorporated or Qualified 06/23/1983	3a. Date of Last Report 01/25/1996
	ace of Business	2a. Mailing Address			4. FEI Number 59-2399026	Applied For
Suite, Apt.	# ptg	26				Not Applicable \$8.75 Additional
22	# ₁ 616.	27			5. Certificate of Status Desired	Fee Required
City & State	9	City & State			6. Election Campaign Financing	\$5.00 May Be
23		28			Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Cou	intry	8. This corporation has liability for i	
24	25	29	30	<u> </u>		Yes X No
	9. Name and Address of Curren	t Registered Agent		81 Name	10. Name and Address of New Re	gistered Agent
				81 Name		
JOHNSON, JOHN T JR.				82 Street Address (P.O. Box Number is Not Acceptable)		
113 RIO DEL MAR ROAD, UNIT B ST AUGUSTINE FL 32084				83		
S! AUG	33 IINE PL 32004					
				84 City		FL 85 Zip Code
11. Pursuant l	to the provisions of Sections 617.050	2 and 617.1508, Florida Statu	ites, the a	bove-named corp	oration submits this statement for the p	urpose of changing its registered
office or re agent. I al	egistered agent, or both, in the State m familiar with third accept thir dolyga	of Florida. Such change was ations of Section 617.0503, F	i authorize Iorida Sta	d by the corporati tutes.	oration submits this statement for the p ion's board of directors. I hereby accep	the appointment as registered
SIGNATURE _	Um T the	1 (m/) nt	Ti	normhol	. Ja K-A.	3/3/9/
	Signature, lyped or pariled name of registered age			d Agent signature require		DATE DIDECTORS IN 12
12.		D DELETE	13.	T.F. T	ADDITIONS/CHANGES TO OFFIC	Change Addition
TITLE	STD U JOHNSON, JOHN T JR.	DELETE	\$.1 T	1		Change
NAME	113 RIO DEL MAR RD UNIT B		1.2 N	TREET ADDRESS		
STREET ADDRESS DITY-ST-ZIP	ST AUGUSTINE FL 32084			ITY+ST-ZIP		
TITLE	PD	DELETE	2.1 T			☐ Change ☐ Addition
NAME	JOHNSON, CHRISTINE	-	2.2 N	1		
STREET ADDRESS	113 RIO DEL MAR RD UNIT B		2.3 S	TREET ADDRESS		
City-St-ZiP	ST AUGUSTINE FL 32084		2.40	CITY-ST-ZIP		
TITLE	D	DELETE	3.1 T	ITLE		Change Addition
NAME	STATON, VAN E		3.2 N	AME		
STREET ADDRESS	113 RIO DEL MAR RD UNIT A		3.3 S	TREET ADDRESS		
CITY-ST-ZIP	ST AUGUSTINE FL 32084	· · · · · · · · · · · · · · · · · · ·	3.4. (CITY-ST-ZIP		
TITLE		☐ DELETE	4.1 T			Change Addition
NAME				NAME		
STREET ADDRESS			1	TREET ADDRESS		
CITY - ST - ZIP		DELETE		ITY-ST-ZIP		Change Addition
TITLE		רו הברבוך	5.1 T			CONTROL CONTROLS
NAME				AME TOTET ADDOCCO		
STREET ADDRESS				TREET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	6.1 7	ITY-ST-ZIP		Change Addition
NAME		La Provide	- 1	IAME		
STREET ADDRESS				TREET ADORESS		

SIGNATURE:

CITY-ST-ZIP

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 of Thanged, depiling a statute of the corporation of the corporation attachment with an address.

FILED

Mar 06 1997 8:00am

Secretary of State