
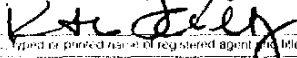
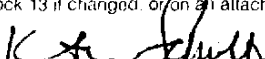


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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

NONPROFIT CORPORATION ANNUAL REPORT 1997		 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS																																																																																																																									
DOCUMENT # 769825 (1) 1. Corporation Name KEEWIN WINTER PARK CENTER OWNERS ASSOCIATION, INC.																																																																																																																											
Principal Place of Business 1071 W MORSE BLVD SUITE 200 WINTER PARK FL 32789 US		Mailing Address 1071 W MORSE BLVD SUITE 200 WINTER PARK FL 32789-3747 US																																																																																																																									
2. Principal Place of Business 21 1095 West Morse Blvd. Suite, Apt #, etc. 22 City & State 23 Winter Park, FL Zip Country 24 32789 25		2a. Mailing Address 26 1095 West Morse Blvd. Suite, Apt #, etc. 27 City & State 28 Winter Park, FL Zip Country 29 32789 30																																																																																																																									
9. Name and Address of Current Registered Agent PYLE, B. C. 1069 W MORSE BLVD WINTER PARK FL 32789		10. Name and Address of New Registered Agent 81 Name Kenneth H. Schultz 82 Street Address (P.O. Box Number is Not Acceptable) 1095 West Morse Blvd. 83 84 City Winter Park 85 Zip Code FL 32789																																																																																																																									
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		Kenneth Schultz (NOTE: Registered Agent signature required when reinstating) DATE 03/19/97																																																																																																																									
12. OFFICERS AND DIRECTORS <table border="1"> <tr> <td>TITLE</td> <td>PD</td> <td><input type="checkbox"/> DELETE</td> </tr> <tr> <td>NAME</td> <td>BANGS, TERRY W</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>1095 W. MORSE BLVD</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>WINTER PARK FL 32789</td> <td></td> </tr> <tr> <td>TITLE</td> <td>VD</td> <td><input type="checkbox"/> DELETE</td> </tr> <tr> <td>NAME</td> <td>O'BRIEN, NEILL III</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>140 N. ORLANDO AVENUE, SUITE 270</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>WINTER PARK FL 32789</td> <td></td> </tr> <tr> <td>TITLE</td> <td>D</td> <td><input type="checkbox"/> DELETE</td> </tr> <tr> <td>NAME</td> <td>MORGAN, PAUL J</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>1099 W. MORSE BLVD, SUITE 2000</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>WINTER PARK FL 32789</td> <td></td> </tr> <tr> <td>TITLE</td> <td>ST</td> <td><input checked="" type="checkbox"/> DELETE</td> </tr> <tr> <td>NAME</td> <td>GIES, LARRY R.</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>1071 W MORSE BLVD., SUITE 201</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>WINTER PART FL</td> <td></td> </tr> <tr> <td>TITLE</td> <td></td> <td><input type="checkbox"/> DELETE</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td></td> </tr> <tr> <td>TITLE</td> <td></td> <td><input type="checkbox"/> DELETE</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td></td> </tr> </table>		TITLE	PD	<input type="checkbox"/> DELETE	NAME	BANGS, TERRY W		STREET ADDRESS	1095 W. MORSE BLVD		CITY-ST-ZIP	WINTER PARK FL 32789		TITLE	VD	<input type="checkbox"/> DELETE	NAME	O'BRIEN, NEILL III		STREET ADDRESS	140 N. ORLANDO AVENUE, SUITE 270		CITY-ST-ZIP	WINTER PARK FL 32789		TITLE	D	<input type="checkbox"/> DELETE	NAME	MORGAN, PAUL J		STREET ADDRESS	1099 W. MORSE BLVD, SUITE 2000		CITY-ST-ZIP	WINTER PARK FL 32789		TITLE	ST	<input checked="" type="checkbox"/> DELETE	NAME	GIES, LARRY R.		STREET ADDRESS	1071 W MORSE BLVD., SUITE 201		CITY-ST-ZIP	WINTER PART 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 <table border="1"> <tr> <td>1.1 TITLE</td> <td><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>1.2 NAME</td> <td></td> </tr> <tr> <td>1.3 STREET ADDRESS</td> <td></td> </tr> <tr> <td>1.4 CITY-ST-ZIP</td> <td></td> </tr> <tr> <td>2.1 TITLE</td> <td></td> </tr> <tr> <td>2.2 NAME</td> <td></td> </tr> <tr> <td>2.3 STREET ADDRESS</td> <td></td> </tr> <tr> <td>2.4 CITY-ST-ZIP</td> <td></td> </tr> <tr> <td>3.1 TITLE</td> <td><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>3.2 NAME</td> <td></td> </tr> <tr> <td>3.3 STREET ADDRESS</td> <td></td> </tr> <tr> <td>3.4 CITY-ST-ZIP</td> <td></td> </tr> <tr> <td>4.1 TITLE</td> <td><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>4.2 NAME</td> <td></td> </tr> <tr> <td>4.3 STREET ADDRESS</td> <td></td> </tr> <tr> <td>4.4 CITY-ST-ZIP</td> <td></td> </tr> <tr> <td>5.1 TITLE</td> <td><input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition</td> </tr> <tr> <td>5.2 NAME</td> <td>ST Schultz, Kenneth H.</td> </tr> <tr> <td>5.3 STREET ADDRESS</td> <td>1095 W. Morse Blvd.</td> </tr> <tr> <td>5.4 CITY-ST-ZIP</td> <td>Winter Park, FL 32789</td> </tr> <tr> <td>6.1 TITLE</td> <td><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>6.2 NAME</td> <td></td> </tr> <tr> <td>6.3 STREET ADDRESS</td> <td></td> </tr> <tr> <td>6.4 CITY-ST-ZIP</td> <td></td> </tr> </table>		1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	1.2 NAME		1.3 STREET ADDRESS		1.4 CITY-ST-ZIP		2.1 TITLE		2.2 NAME		2.3 STREET ADDRESS		2.4 CITY-ST-ZIP		3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	3.2 NAME		3.3 STREET ADDRESS		3.4 CITY-ST-ZIP		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	4.2 NAME		4.3 STREET ADDRESS		4.4 CITY-ST-ZIP		5.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	5.2 NAME	ST Schultz, Kenneth H.	5.3 STREET ADDRESS	1095 W. Morse Blvd.	5.4 CITY-ST-ZIP	Winter Park, FL 32789	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	6.2 NAME		6.3 STREET ADDRESS		6.4 CITY-ST-ZIP	
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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. Kenneth Schultz Sec/Treas. 03/19/97																																																																																																																											
SIGNATURE:  SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date 03/19/97																																																																																																																									



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