

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 # 770513 (0)

1. Corporation Name

EL VIENTO AT BOCA POINTE CONDOMINIUM ASSOCIATION NO.1, INC.



Principal Place of Business

Mailing Address

C/O BEACON PROPERTY MGMT
ONE N OCEAN BLVD., SUITE 7
BOCA RATON FL 33432

C/O BEACON PROPERTY MGMT
ONE N OCEAN BLVD., SUITE 7
BOCA RATON FL 33432

3. Date Incorporated or Qualified
09/30/1983

3a. Date of Last Report
04/10/1995

2. Principal Place of Business

2a. Mailing Address

21 **7908 Granada Place**

26 **500 E. Spanish River Blvd.**

4. FEI Number
59-2384010

Applied For
 Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State
Boca Raton, FL.

27 **#18**

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Election Campaign Financing Trust Fund Contribution **\$5.00 May Be Added to Fees**

23 Zip Country

28 Zip Country

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

24

25

29 **33431**

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**BEACON PROPERTY MANAGEMENT, INC
ONE N OCEAN BLVD., SUITE 7
BOCA RATON FL 33432**

81 Name **Ernest W. Willis**

82 Street Address (P.O. Box Number is Not Acceptable)

Beacon Property Mgmt.

83 **500 E. Spanish River Blvd #18**

84 City **Boca Raton**

85 State **FL**

86 Zip Code **33431**

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

Ernest W. Willis

Ernest W. Willis

3-27-96

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** DELETE
NAME **MILES, KATHY**
STREET ADDRESS **7900 GRANADA PL. #1103**
CITY-ST-ZIP **BOCA RATON FL**

1.1 TITLE Change Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

TITLE **D** DELETE
NAME **GORDEN, IRIS**
STREET ADDRESS **7930 GANDA PLACE #301**
CITY-ST-ZIP **BOCA RATON FL**

2.1 TITLE **D.S.** Change Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE **TD** DELETE
NAME **FISHER, SYLVIA**
STREET ADDRESS **7894 GRANADA PL**
CITY-ST-ZIP **BOCA RATON FL**

3.1 TITLE Change Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE **VD** DELETE
NAME **BERGER, HENRY**
STREET ADDRESS **7894 GRANADA PL. #1003**
CITY-ST-ZIP **BOCA RATON FL**

4.1 TITLE **D.** Change Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE **D** DELETE
NAME **GINSBERG, PETER**
STREET ADDRESS **7906 GRANADA PLACE, #1204**
CITY-ST-ZIP **BOCA RATON FL**

5.1 TITLE **V.D.** Change Addition
5.2 NAME **Randy Bean**
5.3 STREET ADDRESS **7870 Granada Pl. #602, Boca Raton, FL.**
5.4 CITY-ST-ZIP

TITLE DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE Change Addition
6.2 NAME
6.3 STREET ADDRESS
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: *Katherine Miles - President*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date **4/10/96**

Daytime Phone #

CR2E037 (12/95)