

FILE NOW: FILING FEE IS \$61.25

FILED

Mar 31 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 770599 (9)

1. Corporation Name
THE PALM SPRINGS SQUARE CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business: 631 PALM SPRINGS DRIVE, SUITE 111, %ROBERT J. MACMURRAY, M.D., P.A., ALTAMONTE SPRINGS FL 32701
Mailing Address: 631 PALM SPRINGS DRIVE, SUITE 111, %ROBERT J. MACMURRAY, M.D., P.A., ALTAMONTE SPRINGS FL 32701-7881

3. Date Incorporated or Qualified: 10/04/1983
3a. Date of Last Report: 03/26/1996
4. FEI Number: 26-5351298
5. Certificate of Status Desired: [] \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution: [] \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: [] Yes [] No

2. Principal Place of Business: 21 Suite, Apt. #, etc.: 22 City & State: 23 Zip: 24 Country: 25
2a. Mailing Address: 26 Suite, Apt. #, etc.: 27 City & State: 28 Zip: 29 Country: 30

9. Name and Address of Current Registered Agent
MACMURRAY, ROBERT
631 PALM SPRINGS DRIVE, #101
ALTAMONTE SPRINGS FL 32701

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City: FL 85 Zip Code

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 of 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: Robert J. MacMurray [Signature] DATE: 3/12/97

12. OFFICERS AND DIRECTORS
TITLE [] DELETE
NAME
STREET ADDRESS
CITY - ST - ZIP
PD MACMURRAY, ROBERT
631 PALM SPRINGS DR. 101
ORLANDO FL
DV MACMURRAY, DIANE
631 PALM SPRINGS DR 101
ALTAMONTE SPRINGS FL
OST KEMPER, SUSAN
631 PALM SRPINGS DR. 111
ALTAMONTE SPRINGS FL
D BALLENTINE, R. E.
631 PLM SPRINGS DR 107
ALTAMONTE SPRINGS FL
D SCHAFER, EDWARD
1941 MOHICAN TRAIL
MAITLAND FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
1.1 TITLE [] Change [] Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP
2.1 TITLE [] Change [] Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP
3.1 TITLE [] Change [] Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP
4.1 TITLE [] Change [] Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP
5.1 TITLE [] Change [] Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 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 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 in an attachment with an address.

SIGNATURE: Robert J. MacMurray [Signature] DATE: 3/25/97

CR2E037 (9/96)