

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 # N06103 (8)
1. Corporation Name

STEEPLECHASE TOWNHOMES OWNERS' ASSN., INC.



Principal Place of Business: **3490 E LAKE RD STE C PALM HARBOR FL 34685 US**
Mailing Address: **PO BOX 1448 PALM HARBOR FL 34682-1448 US**

3. Date Incorporated or Qualified: **11/09/1984**
3a. Date of Last Report: **04/25/1995**
4. FEI Number: **59-2469252**
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, 22, 23, 24
2a. Mailing Address: 26, 27, 28, 29, 30

9. Name and Address of Current Registered Agent: **SCANNAVINO, DOMINICK 3490 E LAKE RD STE C PALM HARBOR FL 34685**
10. Name and Address of New Registered Agent: 81 Name, 82 Street Address, 83, 84 City, 85 Zip Code **FL**

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: _____ (NOTE: Registered Agent signature required when reinstating) DATE: _____

| 12. OFFICERS AND DIRECTORS | | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | |
|----------------------------|--|---|--|
| TITLE | PD GIULIANO, EDWARD 384 BUCKINGHAM PL PALM HARBOR FL | 1.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | 1.2 NAME | |
| STREET ADDRESS | | 1.3 STREET ADDRESS | |
| CITY-ST-ZIP | | 1.4 CITY-ST-ZIP | |
| TITLE | VD HOOTON, RUTH 357 STEEPLCHASE LN PALM HARBOR FL | 2.1 TITLE | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | 2.2 NAME | |
| STREET ADDRESS | | 2.3 STREET ADDRESS | D/V/P Lucier, Arthur L. 214 Hunter Court Palm Harbor FL 34684 |
| CITY-ST-ZIP | | 2.4 CITY-ST-ZIP | |
| TITLE | D WURTZINGER, ROBERT 100 HUNTER CT PALM HBR FL | 3.1 TITLE | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | 3.2 NAME | |
| STREET ADDRESS | | 3.3 STREET ADDRESS | Bill Wenzel 344 Buckingham Place Palm Harbor, FL 34684 |
| CITY-ST-ZIP | | 3.4 CITY-ST-ZIP | |
| TITLE | DS RATHER, GWEN 220 HUNTER CT PALM HARBOR FL | 4.1 TITLE | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | 4.2 NAME | |
| STREET ADDRESS | | 4.3 STREET ADDRESS | D/S Richard Severson 100 Hunter Court Palm Harbor, FL 34684 |
| CITY-ST-ZIP | | 4.4 CITY-ST-ZIP | |
| TITLE | D MALKIN, SEYMOUR 350 BUCKINGHAM PLACE PALM HARBOR FL | 5.1 TITLE | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | 5.2 NAME | |
| STREET ADDRESS | | 5.3 STREET ADDRESS | D/T Malkin, Seymour 350 Buckingham Place Palm Harbor, FL 34684 |
| CITY-ST-ZIP | | 5.4 CITY-ST-ZIP | |
| TITLE | <input type="checkbox"/> DELETE | 6.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | 6.2 NAME | |
| STREET ADDRESS | | 6.3 STREET ADDRESS | |
| CITY-ST-ZIP | | 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: Seymour Malkin Date: Jan 31, 1996
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E037 (12/95)