

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Maynard
Secretary of State
Division of Corporations

APPROVED
(AND)
FILED

95 MAY -1 PM 12:07

DOCUMENT # **N13676** (4)

FISHER ISLAND COMMUNITY ASSOCIATION, INC.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

1. Principal Office Address ONE FISHER ISLAND DRIVE FISHER ISLAND FL 33109		2a. Mailing Address ONE FISHER ISLAND DRIVE FISHER ISLAND FL 33109		3. Date Incorporated or Qualified 03/04/1986	3a. Date of Last Report 04/25/1994
2. Incorporation Date 21		2a. Mailing Address 26		4. FIC Number 65-0004587	Applied For Not Applicable
22		27		5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
23		28		6. For-profit corporation <input type="checkbox"/>	\$5.00 May Be Added to Fees
24		25		7. Nonprofit with 601 activities Tax Exempt Status <input type="checkbox"/>	\$68.75 Supplemental Fee Not Required
29		30		8. This corporation has liability for incorporation under the 1995 Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent MASH, MICHAEL A., JR. ONE FISHER ISLAND DRIVE FISHER ISLAND FL 33109		10. Name and Address of Now Registered Agent	
		81. Name JOSEPH M. PALMAR	
		82. Mailing Address (P.O. Box Number if Not Applicable) ONE FISHER ISLAND DRIVE	
		83.	
		84. City FISHER ISLAND	85. Zip Code FL 33109
11. I, the undersigned, certify that the above information is true and correct, and that the person named corporation satisfies the statement for the purpose of having its registered office set up as required by the laws of the State of Florida. This information was authorized by the corporation's board of directors, I hereby accept the appointment as registered agent. I am a resident of the State of Florida. JOSEPH M. PALMAR, TREASURER			

12. OFFICERS AND DIRECTORS	13. OFFICERS AND DIRECTORS
NAME: PD MASH, MICHAEL A., JR. ONE FISHER ISLAND DRIVE FISHER ISLAND FL	NAME: FRANK C. WEED
NAME: TD BROWN, KENNETH L. ONE FISHER ISLAND DRIVE FISHER ISLAND FL	NAME: JOSEPH M. PALMAR
NAME: S BIER, JOSEPH A. ONE FISHER ISLAND DRIVE FISHER ISLAND FL	NAME: IRWIN M. POTASH, MD
NAME: D STEELE, HARRY M 2413 FISHER ISLAND DRIVE FISHER ISLAND FL	NAME: D MICHAEL POSEY ONE FISHER ISLAND DRIVE FISHER ISLAND FL

14. I, the undersigned, certify that the above information is true and correct, and that the person named corporation satisfies the statement for the purpose of having its registered office set up as required by the laws of the State of Florida. This information was authorized by the corporation's board of directors, I hereby accept the appointment as registered agent. I am a resident of the State of Florida.
JOSEPH M. PALMAR

SIGNATURE: _____

305-535-6039