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NONPROFIT CORPORATION ANNUAL REPORT 96



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

DOCUMENT # N14593 (0)

CARMEL AT THE CALIFORNIA CLUB CONDOMINIUM "26" ASSOCIATION, INC.



Principal Place of Business and Mailing Address fields with details for C/O DCI, 2901 SIMMS ST., HOLLYWOOD FL 33020 US.

3. Date Incorporated or Qualified (04/25/1986), 3a. Date of Last Report (04/11/1995), 4. FEI Number (59-2549691), 5. Certificate of Status Desired, 6. Election Campaign Financing, 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes.

2. Principal Place of Business, 2a. Mailing Address, 21-24. Suite, Apt. #, etc., City & State, Zip, Country.

9. Name and Address of Current Registered Agent: MEYROWITZ, ANDREW, C/O DCI, 2901 SIMMS ST., HOLLYWOOD FL 33020.

10. Name and Address of New Registered Agent fields (81-85).

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

Table with 2 columns: 12. OFFICERS AND DIRECTORS (TITLE, NAME, STREET ADDRESS, CITY-ST-ZIP) and 13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS (1.1-1.4, 2.1-2.4, 3.1-3.4, 4.1-4.4, 5.1-5.4, 6.1-6.4).

Additional changes section with checkboxes for Change and Addition, and a stamp: 600001854926 -06/07/96--01011--021 ***61.25. Includes handwritten initials 'JR' and '6-96'.

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 199.032(1), 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: [Signature] DATE: 5/3/96

CR2F037 (12/95)