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FILED
Mar 13 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N15344 (7)

1. Corporation Name
OLD TRAIL HOMEOWNERS ASSOCIATION, INC.



Principal Place of Business 400 TONEY PENNA DRIVE JUPITER FL 33458 US	Mailing Address 400 TONEY PENNA DRIVE JUPITER FL 33458-5713 US
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3. Date Incorporated or Qualified 06/12/1986	3a. Date of Last Report 06/14/1996
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2. Principal Place of Business 21 Suite, Apt #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country
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4. FEI Number 59-2717786	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

SHERIDAN
SPRINGER, SHERINAN
400 TONEY PENNA DRIVE
JUPITER FL 33458

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
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 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

TITLE	D	<input type="checkbox"/> DELETE
NAME	ADEN, BILL	
STREET ADDRESS	18680 SE OLD TRAIL DR., E.	
CITY-ST-ZIP	JUPITER FL	
TITLE	VD	<input checked="" type="checkbox"/> DELETE
NAME	KING, BILL	
STREET ADDRESS	3533 SE LONG POND TERRACE	
CITY-ST-ZIP	JUPITER FL	
TITLE	S	<input type="checkbox"/> DELETE
NAME	KAUFMAN, LISA	
STREET ADDRESS	400 TONEY PENNA DRIVE	
CITY-ST-ZIP	JUPITER FL 33458	
TITLE	P	<input type="checkbox"/> DELETE
NAME	HARTLEY, GREGG	
STREET ADDRESS	18218 SE OLD TRAIL DR., E.	
CITY-ST-ZIP	JUPITER FL	
TITLE	TD	<input checked="" type="checkbox"/> DELETE
NAME	VIAMONTES, DEBBIE	
STREET ADDRESS	400 TONEY PENNA DRIVE	
CITY-ST-ZIP	JUPITER FL 33458	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	VD (VICE PRES/DIR.)	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY-ST-ZIP		
2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE	S/T/D (SEC. TREAS./DIR.)	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE	P/D (PRES./DIR.)	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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 on an attachment with an address.

SIGNATURE: Gregg Hartley Date: 1-7-97 Daytime Phone #: 561-840-1161

CR2E037 (9/96)