

FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **N19240** (3)

1. Corporation Name:
MARITANA COURT CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business: 3390 W. MARITANA DRIVE. APT. 3 ST. PETERSBURG FL 33706-1011
Mailing Address: 3390 W. MARITANA DRIVE. APT. 3 ST. PETERSBURG FL 33706-1011

3. Date Incorporated or Qualified 02/13/1987	3a. Date of Last Report 04/21/1995
4. FFI Number 59-2917128	Applied For 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 checked="" type="checkbox"/> No	

21. Principal Place of Business 3390 W. Maritana Dr.	2a. Mailing Address 3390 W. Maritana Dr.
22. # 5	27. # 5
23. City & State St. Pete Bch, FL	28. City & State St. Pete Bch, FL
24. Zip 33706	29. Zip 33706
25. County Pinellas	30. County Pinellas

9. Name and Address of Current Registered Agent

RENFROW, ROBERT P.
6830 CENTRAL AVE STE B
ST. PETERSBURG FL 33707

10. Name and Address of New Registered Agent

81. Name Kenneth H. Kelley
82. Street Address (P.O. Box Number is Not Acceptable) 3390 W. Maritana Dr.
83. # 5
84. City St. Pete Bch
FL 85. Zip Code 33706

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 provisions of, Section 617.0503, Florida Statutes.

SIGNATURE: *[Signature]* **KENNETH H. KELLEY** 1-19-96
DATE

12. OFFICERS AND DIRECTORS

12.1 NAME: VD WATSON, SHERRIE	<input type="checkbox"/> DELETE
12.2 STREET ADDRESS: 3390 W MARITANA, APT 2 ST. PETERSBURG FL	
12.3 CITY, ST, ZIP: DP	<input type="checkbox"/> DELETE
12.4 NAME: DUNN, STEVE	
12.5 STREET ADDRESS: 3390 W MARITANA, APT 1 ST PETERSBURG BCH FL	
12.6 CITY, ST, ZIP: TD	<input type="checkbox"/> DELETE
12.7 NAME: SHARER, LARRY W.	
12.8 STREET ADDRESS: 3390 W MARITANA, APT 3 ST. PETERSBURG FL	
12.9 CITY, ST, ZIP: 	<input type="checkbox"/> DELETE
12.10 NAME: 	
12.11 STREET ADDRESS: 	
12.12 CITY, ST, ZIP: 	<input type="checkbox"/> DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

13.1 TITLE: President	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
13.2 NAME: Kenneth H. Kelley	
13.3 STREET ADDRESS: 3390 W. Maritana Dr #5	
13.4 CITY, ST, ZIP: St. Pete Bch, FL 33706	
13.5 TITLE: Sec/Treas.	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
13.6 NAME: Sherrie Watson	
13.7 STREET ADDRESS: 3390 W. Maritana Dr. #2	
13.8 CITY, ST, ZIP: St. Pete Bch, FL 33706	
13.9 TITLE: Sec/Treas. ASSIST	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
13.10 NAME: Norma Kelley	
13.11 STREET ADDRESS: 3390 W. Maritana Dr. #5	
13.12 CITY, ST, ZIP: St. Pete Bch, FL 33706	
13.13 TITLE: 	<input type="checkbox"/> Change <input type="checkbox"/> Addition
13.14 NAME: 	
13.15 STREET ADDRESS: 	
13.16 CITY, ST, ZIP: 	<input type="checkbox"/> Change <input type="checkbox"/> Addition
13.17 TITLE: 	
13.18 NAME: 	
13.19 STREET ADDRESS: 	
13.20 CITY, ST, ZIP: 	<input type="checkbox"/> Change <input type="checkbox"/> Addition

14. I 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: *[Signature]* **KENNETH H. KELLEY** 1-19-96 (813)-824-7138
DATE

CR2E037 (12/95)