

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
 AMOUNT DUE ON OR BEFORE 8/7/96: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25.)

APPROVED
AND
FILED

1996 AUG 30 PM 3: 33

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



NONPROFIT CORPORATION ANNUAL REPORT 1996		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N30857 (9)

1. Corporation Name
REGENT'S PLACE AT BEAR LAKES HOMEOWNER'S ASSOCIATION, INC.

Principal Place of Business 2170 REGENTS BLVD. WEST PALM BEACH FL 33409	Mailing Address 2170 REGENTS BLVD. WEST PALM BEACH FL 33409
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3. Date Incorporated or Qualified 02/24/1989	3a. Date of Last Report 07/07/1995
4. FEI Number 57-0874521	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	

2. Principal Place of Business 2045 Regents Blvd	2a. Mailing Address 2045 Regents Blvd
23. City & State West Palm Beach, FL	28. City & State West Palm Beach, FL
24. Zip 33409	29. Zip 33409

9. Name and Address of Current Registered Agent
**MEYER, COLLIN
2170 REGENTS BLVD.
WEST PALM BEACH FL 33409**

10. Name and Address of New Registered Agent

81 Name William C. Davis, III
82 Street Address (P.O. Box Number is Not Acceptable) 2045 Regents Blvd
83
84 City W. Palm Beach
85 Zip Code FL 33409

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 *x* **William C. Davis III** DATE **6/31/96**

12. OFFICERS AND DIRECTORS		DELETE
TITLE	PD	<input checked="" type="checkbox"/>
NAME	HARRIS, CHIP	
STREET ADDRESS	2176 REGENTS BLVD.	
CITY-ST-ZIP	WEST PALM BEACH FL	
TITLE	VD	<input checked="" type="checkbox"/>
NAME	SHULMAN, JEFFREY I	
STREET ADDRESS	2176 REGENTS BLVD.	
CITY-ST-ZIP	WEST PALM BEACH FL	
TITLE	STD	<input checked="" type="checkbox"/>
NAME	MEYER, COLLIN	
STREET ADDRESS	2170 REGENTS BLVD.	
CITY-ST-ZIP	WEST PALM BEACH FL	
TITLE		<input type="checkbox"/>
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/>
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		Change	Addition
1.1 TITLE	William C. Davis III, Director	<input type="checkbox"/>	<input checked="" type="checkbox"/>
1.2 NAME	2045 Regents Blvd.		
1.3 STREET ADDRESS	W. Palm Beach, FL 33409		
1.4 CITY-ST-ZIP			
2.1 TITLE	Gottfried Dresbach, Director	<input type="checkbox"/>	<input checked="" type="checkbox"/>
2.2 NAME	2163 Regents Blvd.		
2.3 STREET ADDRESS	W. Palm Beach, FL 33409		
2.4 CITY-ST-ZIP			
3.1 TITLE	MICHAEL DEVOGLASLAVIEB, Director	<input type="checkbox"/>	<input checked="" type="checkbox"/>
3.2 NAME	2123 REGENTS BLVD		
3.3 STREET ADDRESS	W P B FL 33409		
3.4 CITY-ST-ZIP			
4.1 TITLE		<input type="checkbox"/>	<input type="checkbox"/>
4.2 NAME			
4.3 STREET ADDRESS			
4.4 CITY-ST-ZIP			
5.1 TITLE		<input type="checkbox"/>	<input type="checkbox"/>
5.2 NAME			
5.3 STREET ADDRESS			
5.4 CITY-ST-ZIP			
6.1 TITLE		<input type="checkbox"/>	<input type="checkbox"/>
6.2 NAME			
6.3 STREET ADDRESS			
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: *x* **William C. Davis III** DATE **6/31/96**

1-800-642-3174
407 683-8750

CR2E037 (3/96)