

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **N32596** (1)
1. Corporation Name
601 OFFICE PLAZA CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business Mailing Address
%RONALD C. KUTSCHINSKI
333-17TH ST., STE. 2 R
VERO BEACH FL 32960

3. Date Incorporated or Qualified 05/31/1989	3a. Date of Last Report 03/08/1995
4. FEI Number 59-2972392	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No	

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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9. Name and Address of Current Registered Agent

KUTSCHINSKI, RONALD C.
333-17TH STREET
SUITE 2 R
VERO BEACH FL 32960

10. Name and Address of New Registered Agent

81 Name	85 Zip Code
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	

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 17.0503, Florida Statutes.

SIGNATURE *Ronald C. Kutschinski*

(Signature typed or printed name of registered agent and corporation below)

(NOTE: Registered Agent signature required when making change)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D ☐ DELETE	11 TITLE	☐ Change ☐ Addition
NAME	KUTSCHINSKI, RONALD C.	12 NAME	
STREET ADDRESS	333-17TH ST., STE. 2 R	13 STREET ADDRESS	
CITY-ST-ZIP	VERO BEACH FL	14 CITY-ST-ZIP	
TITLE	D ☐ DELETE	21 TITLE	☐ Change ☐ Addition
NAME	MILLER, NORMAN E. JR.	22 NAME	
STREET ADDRESS	333-17TH ST., STE. 2 R	23 STREET ADDRESS	
CITY-ST-ZIP	VERO BEACH FL	24 CITY-ST-ZIP	
TITLE	D ☐ DELETE	31 TITLE	☐ Change ☐ Addition
NAME	WRIGHT, VICKIE L.	32 NAME	
STREET ADDRESS	333 17TH ST., STE. 2 R	33 STREET ADDRESS	
CITY-ST-ZIP	VERO BEACH FL	34 CITY-ST-ZIP	
TITLE	☐ DELETE	41 TITLE	☐ Change ☐ Addition
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY-ST-ZIP		44 CITY-ST-ZIP	
TITLE	☐ DELETE	51 TITLE	☐ Change ☐ Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY-ST-ZIP		54 CITY-ST-ZIP	
TITLE	☐ DELETE	61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY-ST-ZIP		64 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: *Ronald C. Kutschinski*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-30-96 4/07-561-2310
Date: Daytime Phone #

CR2E037 (12/95)