


FILE NOW: FILING FEE IS \$61.25

FILED

Apr 09 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 # **N33625** (7)

1. Corporation Name

PASS-A-GRILLE COMMUNITY ASSOCIATION, INC.



Principal Place of Business 609 GULF WAY ST. PETE BEACH FL 33706 US	Mailing Address P.O. BOX 46422 PASS A GRILLE FL 33741-6422 US
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3. Date Incorporated or Qualified 08/09/1989	3a. Date of Last Report 02/02/1996
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2. Principal Place of Business 21 105 30TH AVENUE Suite, Apt. #, etc.	2a. Mailing Address 26 Suite, Apt. #, etc.	4. FEI Number 59-1732051	Applied For Not Applicable
22 City & State 23 ST PETE BCH FL	27 City & State	5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required
24 33706 Zip	25 PINELLAS Country	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
29 Zip	30 Country	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

10. Name and Address of New Registered Agent

**SULTE ROBERT P
609 GULF WAY
ST. PETE BEACH FL 33706**

81 Name ROOS, PETER
82 Street Address (P.O. Box Number is Not Acceptable) 105 30TH AVENUE
83
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 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

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD SULTE, ROBERT P 609 GULF WAY ST. PETE BEACH FL	<input checked="" type="checkbox"/> DELETE	1.1 TITLE PD ROOS, PETER 105 30TH AVENUE ST PETE BCH FL 33706
TITLE	VD ROOS, PETER 105 30TH AVENUE ST. PETE BEACH FL	<input checked="" type="checkbox"/> DELETE	2.1 TITLE VD KREIDER, DONALD 3006 PASS-A-GRILLE WAY ST PETE BCH FL 33706
TITLE	TD MICHAEL, ANN 113 4TH AVE. ST. PETE BEACH FL	<input type="checkbox"/> DELETE	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 33706
TITLE	SD FISHER, JAMES 104 3RD AVE. ST. PETE BEACH FL	<input checked="" type="checkbox"/> DELETE	4.1 TITLE SD RUBIN LAURIE 309 GULF WAY ST PETE BCH FL 33706
TITLE	SD ADAIR, HAZEL 206 PASS-A-GRILLE WAY ST. PETE BEACH FL	<input type="checkbox"/> DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 33706
TITLE		<input type="checkbox"/> DELETE	6.1 TITLE 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: **ANN MICHAEL TD** 3/28/97 (813) 360-8544

CR2E037 (9/96)