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NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

	1996	- Contraction of the Contraction						1			
DOCUI 1. Corporation	MENT :	# N4412	25	(5	5)		-				
		OWNERS ASSOCI	ATION	I, INC.							
Principal Place	of Business		Ma	ailing Address				D YOUR HINK MAY BIRD IN HINK IN INCH	(BA) Ails Biell Bi	DII DIDII DIDI	4 E1811 OFBIL 1801
% AMELIA ISLAND COMPANY AMELIA ISLAND PLANTATION AMELIA ISLAND PLANTATION AMELIA ISLAND FL 32034 AMELIA ISLAND FL 32034											
								3. Date Incorporated or Qualified 06/28/1991	3a. Da	te of Last 06/20/1	
. Principal Pla	ace of Busines	SS	2a. 26	Mailing Addres	s			4. FEI Number 59-3163676		-	Applied For
Suite, Apt. :	#, etc.			Suite Apt. #, e	tc.						Not Applicable Additional
			27					Certificate of Status Desired			Required
City & State)		28	City & State				6. Election Campaign Financing	П		May Be
Zip	T	Country	20	Zφ	<u> </u>	Count	try	Trust Fund Contribution 8. This corporation has liability for			to Fees
		5	29	·	3	30		Florida Statutes	Yes		188.062
	9. Name a	and Address of Currer	nt Regist	tered Agent				10. Name and Address of New	Registered /	Agent	
4 L APT 1 - 4 A	IOI AND ATA					8	Name				
	ISLAND MA RST COAST	NAGEMENT HWY				8	Street Add	dress (P.O. Box Number is Not Accepta	ible)		
	ISLAND FL					8	13				
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OF TEGISTER	eo agent, or b i	om, in the State of Flore	oa Such	i chanoe was au	morizea i	the above	Oity e-named corporporation's box	oration submits this statement for the pu and of directors. I hereby accept the app	FL urpose of cha pointment as		Gode egistered office agent. I am
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oath; that I am an officer or director of the corporation appears in Block 12 or Block 13 if changed, or on a e empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name

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SIGNATURE AND TYPEOUT PRINTED NAME OF THE PRIN F SIGNING OFFICER OR DIRECTOR

Dayt me Phone #

Date