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.) NONPROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1996 N9300000794 (8) **DOCUMENT #** MALIBU HOMEOWNERS ASSOCIATION INC. Mailing Address Principal Place of Business C/O JESSIE L. WINDOM JR. C/O JESSIE L. WINDOM JR 4409 MALIBU STREET 4408 MALIBU STREET ORLANDO FL 32811 ORLANDO FL 32811 3. Date Incorporated or Qualified 03/08/1993 3a. Date of Last Repor 05/01/1995 Applied For 2a. Mailing Address 59-3208733 2. Principal Place of Business Not Applicable 26 21 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. Certificate of Status Desired Fee Required 27 \$5.00 May Be City & State 6. Election Campaign Financing City & State Added to Fees Trust Fund Contribution 28 23 8. This corporation has liability for intangible tax under s. 199.032 Country Zip Country Zip Yes No Florida Statutes 30 29 24 25 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name WINDOM, JESSIE L JR Street Address (P.O. Box Number is Not Acceptable) 4408 MALIBU STREET ORLANDO FL 32811 83 Zip Code 85 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 617.0503, Florida Statutes. SIGNATURE DATE INOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/E)OFFICERS AND DIRECTORS 13. 12 Addition Change DELETE 1.1 TITLE TITLE WINDOM, JESSIE JR 1.2 NAME **CR2E037** NAME 4408 MALIBU STREET 1.3 STREET ADDRESS STREET ADDRESS ORLANDO FL 32811 1.4 CITY - ST - ZIP CITY-ST-ZIP Change Addition DELETE 2.1 TITLE TITLE UNICK, KEN 2.2 NAME NAME 4449 MALIBU STREET 2.3 STREET ADDRESS STREET ADDRESS ORLANDO FL 32811 2.4 CITY - ST-ZIP CITY-ST-ZIP Addition Change DELETE 3.1 TITLE TITLE PAUL, GEORGE 3.2 NAME NAME 327 FANFAIR STREET 3.3 STREET ADDRESS STREET ADDRESS ORLANDO FL 32811 34. CITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE SD 4.1 TITLE TITLE FIGGINS, BETTYE J 4.2 NAME NAME 201 FANFAIR STREET 4.3 STREET ADDRESS STREET ADDRESS ORLANDO FL 32811 4.4 CITY - ST - ZIP CITY-ST-ZIP Addition Change DELETE 51 TITLE TITLE WINDOM, JOHN 5.2 NAME NAME **471 GILMAN CIRCLE** 5.3 STREET ADDRESS STREET ADDRESS ORLANDO FL 32811 5.4 CITY - ST - ZIP CITY-ST-ZIP Change Addition DELETE 6.1 TITLE TITLE 62 NAME NAME 6.3 STREET ADDRESS 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 cath; 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 changed and accurate and accurate and that my signature shall have the same legal effect as if made under cath; that I am an officer or directory 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 changed and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I for the corporation of 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 changed in the corporation of the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes.

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SIGNATURE: