

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 # N94000004189 (6)

1. Corporation Name

201 NORTH CLYDE MORRIS CONDOMINIUM ASSOCIATION,
INC.

Principal Place of Business

Mailing Address

1325 W. COLONIAL DR., SUITE 200
ORLANDO FL 32803

1325 W. COLONIAL DR., SUITE 200
ORLANDO FL 32803



3. Date Incorporated or Qualified
08/25/1994

3a. Date of Last Report
04/11/1995

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

23 City & State

27 City & State

24 Zip

25 Country

29 Zip

30 Country

4. FEI Number

APPLIED FOR 59-3304482

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

KANAN, BRADFORD
1325 W. COLONIAL DR., SUITE 200
ORLANDO FL 32803

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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 ☐ DELETE
NAME KANAN, BRADFORD S
STREET ADDRESS 1325 W. COLONIAL DR., SUITE 200
CITY-ST-ZIP ORLANDO FL 32803

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

TITLE VD ☒ DELETE
NAME SLAVENS, JOHN W
STREET ADDRESS 1325 W. COLONIAL DR., SUITE 200
CITY-ST-ZIP ORLANDO FL 32803

2.1 TITLE ☐ Change ☒ Addition
2.2 NAME VD
2.3 STREET ADDRESS TRACEY, RICHARD J
2.4 CITY-ST-ZIP 1325 W. COLONIAL DR.
ORLANDO, FL 32804

TITLE D ☐ DELETE
NAME TRACEY, RICHARD J
STREET ADDRESS 1325 W. COLONIAL DR., SUITE 200
CITY-ST-ZIP ORLANDO FL 32803

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE D ☐ DELETE
NAME LANG, DANIEL
STREET ADDRESS 1325 W. COLONIAL DR., SUITE 200
CITY-ST-ZIP ORLANDO FL 32803

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME 000001769860
4.3 STREET ADDRESS -04/04/96--01097--013
4.4 CITY-ST-ZIP ***61.25

TITLE D ☐ DELETE
NAME GOLDBERG, PAUL M
STREET ADDRESS 1325 W. COLONIAL DR., SUITE 200
CITY-ST-ZIP ORLANDO FL 32803

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE ST ☒ DELETE
NAME ENDICOTT, JOHN P
STREET ADDRESS 1325 W. COLONIAL DR., SUITE 200
CITY-ST-ZIP ORLANDO FL 32803

6.1 TITLE ☐ Change ☒ Addition
6.2 NAME ST
6.3 STREET ADDRESS WILLIAMS, JOSEPH M.
6.4 CITY-ST-ZIP 1325 W. COLONIAL DR.
ORLANDO, FL 32804

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

BRADFORD S. KANAN Feb 23

96 407
425-8455

CR2E037 (12/95)