CORI ANNU	NPROFIT PORATION IAL REPORT 1996	NG FEE IS \$61.2 FLORIDA DEPARTME Sandra B. Mo Secretary of S DIVISION OF CORP	OF STATE m	
DOCUN 1. Corporation	MENT # N9400	0005999 (7)		
	957 DAY AVENUE CONDO	MINIUM ASSOCIATION, IN		
Principal Place		Mailing Address		t ingelen nin inii dikii natit antii anti
2957 DAY AV STE A COCONUT G	/E ROVE FL 33134	21 S.E. FIRST AVE. Miami Fl		
US				3. Date Incorporated or Qualified 3a. Date of Last Report 12/07/1994 05/01/1995
	ace of Business Palermo Auc	28. Mailing Address 26 813 Aulerma	Ave	4. FEI Number Applied For APPLIED FOR Not Applicable
Suite, Apt. 1		Suite, Apt. #, etc.		5. Certificate of Status Desired S8.75 Additional Fee Required
City & State	yavics	City & State Gables	ŦL	6. Election Campaign Financing \$5.00 May Be
23 FL 24 ^{Zip} 33 I	Country	Zip	(intry	Added to Fees Added to Fees Added to Fees Added to Fees
24 35	9. Name and Address of Curren	29 33 134 30 nt Registered Agent		Florida Statutes Yes No 10. Name and Address of New Registered Agent
	·····			AGNUS LILJEDAHL
	NK, LEAGNUS LERMO AVE		01-	S PALER MO AVE
	GABLES FL 33134		83	
			84 City Co	EAL GABLES FL B5 Zip Code 33 134
11. Pursuant i	to the provisions of Sections 617.050 ed agent, or both, in the Stateof Fys	2 and 617,1508, Florida Statutes, the ida. Such change was authorized by	e ve-named corpor tr corporation's boa	Ed.L GABLES FL 85 Zip Code ration submits this statement for the purpose of changing its registered office 33 1344 rd of directors. I hereby accept the appointment as registered agent. I am
11. Pursuant i	to the provisions of Sections 617 050 red agent, or both, in the Stateof Flor ith, and accept the obligation of the	2 and 617,1508, Florida Statutes, the ida. Such change was authorized by 1 frior 614,0503, Florida Statutes.	the corporation's boa	radion southlits this statement for the purpose of changing its registered office ind of directors. I hereby accept the appointment as registered agent. I am
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