


FILE NOW: FILING FEE IS \$61.25

FILED

**May 06 1998 8:00am
Secretary of State**

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Northam Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N94000006211 (6)
1. Corporation Name
2527 MARYLAND AVENUE CONDOMINIUM ASSOCIATION, IN C.



Principal Place of Business 2527 MARYLAND AVE TAMPA FL 33629 US	Mailing Address 2527B W MARYLAND AVE TAMPA FL 33629-8203 US
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3. Date Incorporated or Qualified
12/19/1994

4. FEI Number
59-3295016

Applied For	Not Applicable
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2. Principal Place of Business 21	2a. Mailing Address 26 2527A W. Maryland Ave.
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28 Tampa FL
Zip 24	Country 25
	29 33629 30 US

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Election Campaign Financing Trust Fund Contribution **\$5.00 May Be Added to Fees**

7. Is this nonprofit corporation a homeowners association?
 Yes No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.
 Yes No

9. Name and Address of Current Registered Agent
**VOELPEL, JOHN W
2527B W MARYLAND AVE
TAMPA FL 33629**

10. Name and Address of New Registered Agent

81 Name Christian A. Kamaris
82 Street Address (P.O. Box Number Is Not Acceptable) 2527A W. Maryland Ave.
83
84 City Tampa FL 85 Zip Code 33629

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]* **Christian A. Kamaris Director 4/28/98**
Signature typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		DELETED
TITLE	T	<input checked="" type="checkbox"/>
NAME	GETZOFF, DEBORAH A	
STREET ADDRESS	2527 B MARYLAND AVE	
CITY-ST-ZIP	TAMPA FL	
TITLE	D	<input checked="" type="checkbox"/>
NAME	VELA, RICARDO J	
STREET ADDRESS	2527 A MARYLAND AVE	
CITY-ST-ZIP	TAMPA FL	
TITLE	D	<input type="checkbox"/>
NAME	VOELPEL, JOHN W	
STREET ADDRESS	2527B MARYLAND AVE	
CITY-ST-ZIP	TAMPA FL	
TITLE		<input type="checkbox"/>
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/>
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		Change	Addition
1.1 TITLE	D	<input checked="" type="checkbox"/>	<input type="checkbox"/>
1.2 NAME	Getzoff, Deborah A		
1.3 STREET ADDRESS	2527 B W. Maryland Ave.		
1.4 CITY-ST-ZIP	Tampa FL 33629		
2.1 TITLE	D	<input type="checkbox"/>	<input checked="" type="checkbox"/>
2.2 NAME	Martini, Caitilin R.		
2.3 STREET ADDRESS	2527A W. Maryland Ave.		
2.4 CITY-ST-ZIP	Tampa FL 33629		
3.1 TITLE	D/T	<input type="checkbox"/>	<input checked="" type="checkbox"/>
3.2 NAME	Kamaris, Christian A.		
3.3 STREET ADDRESS	2527 A W. Maryland Ave.		
3.4 CITY-ST-ZIP	Tampa FL 33629		
4.1 TITLE		<input type="checkbox"/>	<input type="checkbox"/>
4.2 NAME			
4.3 STREET ADDRESS			
4.4 CITY-ST-ZIP			
5.1 TITLE		<input type="checkbox"/>	<input type="checkbox"/>
5.2 NAME			
5.3 STREET ADDRESS			
5.4 CITY-ST-ZIP			
6.1 TITLE		<input type="checkbox"/>	<input type="checkbox"/>
6.2 NAME			
6.3 STREET ADDRESS			
6.4 CITY-ST-ZIP			

14. I 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: *[Signature]* **Christian A. Kamaris 4/25/98 813-258-4553**

CFR2037 (10/97)