FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretar 🗨. Statu

DIVISION OF CORPORATIONS

DOCUMENT #	N95000000706	(0)
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JESSICA CONDOMINIUM ASSOCIATION, INC.

JESSICA CONDUMINIUM ASSOCIATION, INC.					
Principal Place	of Business	Mailing Address		3 INDILLED BAS IRIDI BILLI ODDIL ODDIL	i Albert Anter moter moter (anti- antea nest ende
	ISSIONAL WAY EACH FL 33373	-1702 CONGRESSIONAL WAY			
				3. Date incorporated or Qualified 02/14/1995	3a. Date of Last Report
2. Principal Pla 21 /8/5	ce of Business N. A. I.A.	2a. Mailing Address 26 18/5 N.	AIA	4. FEI Number	Applied For Not Applicable
Suite, Apt. #	, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	LERBEACH FL	28 FLAGLER &	EACH, FL	6: Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
^{Žp} 3ン/	36 Country 25	29 32136 30	Country		Yes No
	9, Name and Address of Current I	Registered Agent		10. Name and Address of New R	legistered Agent
			81 Name		
	KER, RICHARD		82 Street Add	iress (P.O. Box Number is Not Acceptab	ie)
7.000	NGRESSIONAL WAY		83		
- Principal Act	ED DENOM IL GOOR		84 City		85 Zip Code
					FL -
11. Pursuant to or registere familiar wit	o the provisions of Sections 617.0502 a ed agent, or both, in the State of Florida h, and accept the obligations of, Section	nd 617.1508, Florida Statutes, tl . Such change was authorized b . 617.0503, Florida Statutes.	ne above named corporation's bo	oration submits this statement for the pur and of directors. I hereby accept the app	rpose of changing its registered office ointment as registered agent. I am
SIGNATURE					
	Signature, typed or printed name of registered agent an		agistered Agent signature requi	ed when reinstating) ADDITIONS/CHANGES TO OFF	DATE
12.	OFFICERS AND	DELETE	13.	ADDITIONS/CHANGES TO OFF	Change Addition
NAME	D D	Бесете			
STREET ADDRESS	WHITTAKER, RICHARD *1702 DONGRESSIONAL WAY		13 STREET ADDRESS	815 N.AIA	[8
CITY-ST-ZIP	DEERFIELD BEACH FL 33373	•	14 CITY-ST-ZIP	815 N.AIA LAGLER BEACH,I	FL 32/36
TITLE	D	DELETE	2.1 TITLE	2.100	Change Addition
NAME	HAHN, WILLIAM	_	2 2 NAME		
STREET ADDRESS	1001 NW 153RD DRIVE		2 3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL		2 4 CITY-ST-ZIP		<u> </u>
TITLE	_	DELETE	3 1 TITLE		☐ Change ☐ Addition
NAME	D WHITAKER, ALICIA	·	32 NAME		
STREET ADDRESS	1815 N. A1A		3 3 STREET ADDRESS		
CITY-ST-ZIP	Flagler Beach, FL 32	136	3 4 CITY-ST-ZIP		
TITLE		□DELETE	4 1 TITLE		☐ Change ☐ Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY - ST - ZIP	<u> 60000186</u>	55676
TITLE		☐ DEL€TE	5 1 TITLE	60000186 -06/18/9601	118095Change
NAME			5 2 NAME	***61.25	
STREET ADDRESS			5 3 STREET ADDRESS		
CITY-ST-ZIP			54 CITY-ST-ZIP		
TITLE		□ DELETE	61 TITLE		Change Addition
NAME			6 2 NAME		
STREET ADDRESS			6 3 STREET ADDRESS		
CITY-ST-ZIP			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 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 or changed, or on an attachment with an address.

SIGNATURE:

4/17/96 439-1720 Daytime Fronce