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SECRETARY OF STATE
TALLAHASSEE, FLORIDA



NONPROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N95000004347 (9)
1. Corporation Name
COSTA DEL SOL AT PELICAN LANDING CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business: 123 NW 13TH ST SUITE 300 BOCA RATON FL 33432
Mailing Address: 123 NW 13TH ST SUITE 300 BOCA RATON FL 33432-1689

3. Date Incorporated or Qualified: 09/08/1995
3a. Date of Last Report: 04/24/1996

2. Principal Place of Business (21-24)
2a. Mailing Address (25-28)
21. Suite, Apt. #, etc.
22. City & State
23. Zip
24. Country

4. FEI Number: 65-0696337
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
KNEEN, JEFFEREY D
1400 CENTREPARK BOULEVARD
SUITE 1000
WEST PALM BEACH FL 33401

10. Name and Address of New Registered Agent
81. Name
82. Street Address (P.O. Box Number is Not Acceptable)
83.
84. City
85. Zip Code: FL

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: _____ (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DP	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WOLF, ROBERT S	1.2 NAME	
STREET ADDRESS	123 NW 13TH ST SUITE 300	1.3 STREET ADDRESS	700002134147 - 7
CITY-ST-ZIP	BOCA RATON FL 33432	1.4 CITY-ST-ZIP	-04/04/97--01091--014
TITLE	DV	2.1 TITLE	****61.25 <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ENGELSTEIN, HARRY	2.2 NAME	
STREET ADDRESS	123 NW 13TH ST SUITE 300	2.3 STREET ADDRESS	
CITY-ST-ZIP	BOCA RATON FL 33432	2.4 CITY-ST-ZIP	
TITLE	DST	3.1 TITLE	700002134147 - 7
NAME	LYNNE, GAUDET	3.2 NAME	-04/04/97--01104--001
STREET ADDRESS	123 NW 13TH ST SUITE 300	3.3 STREET ADDRESS	****218.75 *****8.75
CITY-ST-ZIP	BOCA RATON FL 33432	3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> 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 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.

CR2E037 (9/96)

JB4-8-97