CO	ON OR BEFORE 8/1/96: \$61.25 (IF ONPROFIT RPORATION IUAL REPORT		FLORIDA DEPA Sandra Secret DIVISION OF	ARTMENT OF STATE  B. Mortham lary of State  CORPÓRATIONS	25.)	
DOCUMENT # N9500004550 (8)  MONROE COUNTY IMPROVED SUBDIVISION RESIDENT HOME OWNERS ASSOCIATION, INC.						
Principal Pla	ce of Business	Mailing		<b>       </b>		
C/O MCISRHA. INC. P.O. BOX 17343 PO BOX 421148 SUMMERLAND KEY FL 33042-0281 SUMMERLAND KEY FL 33042					3 Date Incorporated or Qualified	
2. Principa!	Place of Business	2a Mai	lion Address		3. Date Incorporated or Qualified 09/22/1995	3a. Date of Last Report
21	26				4. FEI Number 65-0609718	Applied For Not Applicable
Suite, Apt	·	Suit 27	te, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Sta	te	City	& State		6. Election Campaign Financing	\$5.00 May Be
Zip	Country 25	Zip		Country	Trust Fund Contribution  8. This corporation has liability for it	Added to Fees  ntangible tax under s. 199,032
	9. Name and Address of Co	29 Jrrent Registered	Agent	30	Florida Statutes  10. Name and Address of New Rec	Yes X No
11. Pursuant office or i agent. I a	im familiar with, and accept the o	.0502 and 617.150 tate of Florida. Su bligations of, Sect	ion 617.0503, Fic	es, the above-named corruthorized by the corporal ordinal Statutes.	poration submits this statement for the pur tion's board of directors. I hereby accept t	FL 85 Zip Code  rpose of changing its registered the appointment as registered
12.	Signature, typed or printed name of registere	d agent and title if applic S AND DIRECTOR:		E Registered Agent signature requ		DATE
TITLE	O. F. TOETIC	AND BINEOTON	DELETE	13. 1.1 TITLE	ADDITIONS/CHANGES TO OFFICE	EFIS AND DIRECTORS IN 12  Change Addition
NAME STREET ADDRESS	Sec.	1		1.2 NAME 1.3 STREET ADDRESS		
CITY-SY-ZIP	##	adment	<b>,</b> , , , , , , , , , , , , , , , , , ,	1.4 CITY-ST-ZIP		
NAME			DELETE	2.1 TITLE 2.2 NAME		Change Addition
STREET ADDRESS				2.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		<del></del>	DELETE	2 4 CITY - ST - ZIP 3 1 TITLE		Change Addition
NAME STREET ADDRESS				3.2 NAME		Change Addition
CITY-ST-ZIP			<b>, ,</b>	3.3 STREET ADDRESS 3.4. CITY - ST - ZIP		
TITLE NAME			DELETE	4.1 TITLE 4.2 NAME		Change Addition
STREET ADDRESS				4.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		n-u	DELETE	4.4 CITY - ST - ZIP 5 1 TITLE		Change
NAME STREET ADDRESS				5 2 NAME		Change Addition
CITY-ST-ZIP				5.3 STREET ADDRESS 5.4 CITY - ST - ZIP		
TITLE NAME			DELETE	6.1 TITLE	600001922 -08/15/9601005	Shange Addition
STREET ADDRESS				6 2 NAME 6 3 STREET ADDRESS	-08/15/9601005 ***61.25	029
14. I do hereb	y certify that the information supp	lied with this filing	is voluntarily furr	6.4 CITY-ST-ZIP		07/2)/k\ Florida Cata
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 that my name appears in Brock 12 or Block 13 if changed, or on an attachment with an address.						
SIGNAT	URE: SIGNATURE AND TYPED	OR PRINTED NAME OF	SIGNING OFFICER O	ANLES RA	71LLS. JR. 7-17-9	6 Daytune Phone #

MONROE COUNTY IMPROVED SUBDIVISON RESIDENT HOME OWNERS ASS INC. LIST OF OFFICERS AND DIRECTORS

TITLE P

MILLS, CHARLES R JR.

24949 PALM LN. SUMMERLAND KEY FL 33042-0281

TITLE VP

PAXTON GENE
22338 JOLLY ROGER RD
CUDJOE KEY FL 33042

TITLE T

WIELBTEAT SR.
24960 PALM LN.
SUMMERLAND KEY FL 33042-0493

TITLE ST

1

CARPENTER JUANITA 24950 PALM LN. SUMMERLAND KEY FL 33042

TITLE D

DRINKWATER ART 95 BAY DR. KEY WEST FL 33040

TITLE D

READ NELSON 1509 PATRICA ST. KEY WEST FL 33040

TITLE D

HOOVER ED 20924 7th AVE W. SUMMERLAND KEY FL 33042-4015

TITLE D

HINTON GENE 150 INDIES SOUTH. DUCK KEY FL 33050 TITLE D

SHINKEVICH EUGENE 1206 W SHORE DR. BIG PINE KEY FL 33043

TITLE D
YORDE LINDA
22 N AIRPORT DR.
SUMMERLAND KEY FL 33042-0642