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Jan 16 1997 8:00am  
Secretary of StateNONPROFIT  
CORPORATION  
ANNUAL REPORT  
1997FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # N96000003008 (7)

1. Corporation Name

1400 BUILDING OWNER'S ASSOCIATION, INC.



Principal Place of Business

Mailing Address

1400 PALM BAY ROAD N.W.  
PALM BAY FL 329051400 PALM BAY ROAD N.W.  
PALM BAY FL 32905-38513. Date Incorporated or Qualified  
06/03/19963a. Date of Last Report  
N/A

2. Principal Place of Business

2a. Mailing Address

21 1400 Palm Bay Rd NE

26 1400 Palm Bay Rd NE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

City &amp; State

27

City &amp; State

23 Palm Bay, FL

28 Palm Bay, FL

Zip

Country

Zip

Country

24 32905

25 USA

29 32905

30 USA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

SMITH, KEVIN A  
1400 PALM BAY ROAD N.W.  
PALM BAY FL 32905

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

1400 Palm Bay Rd N.E

83

84 City

Palm Bay

FL

85 Zip Code

32905

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, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE VD  
NAME SMITH, HUGH JR  
STREET ADDRESS 1400 PALM BAY ROAD N.W.E  
CITY-ST-ZIP PALM BAY FL 329051.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS 1400 Palm Bay Rd NE  
1.4 CITY-ST-ZIPTITLE PTD  
NAME SMITH, KEVIN A  
STREET ADDRESS 1400 PALM BAY ROAD N.W.E  
CITY-ST-ZIP PALM BAY FL 329052.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS 1400 Palm Bay Rd NE  
2.4 CITY-ST-ZIPTITLE SD  
NAME CHILES-COOKE, CONNIE  
STREET ADDRESS 1400 PALM BAY ROAD N.W. E  
CITY-ST-ZIP PALM BAY FL 329053.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS 1400 Palm Bay Rd NE  
3.4 CITY-ST-ZIPTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIPTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIPTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
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.

SIGNATURE: Connie Chiles-Cooke

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/6/97 407-929-9559

Date

Daytime Phone # 0018742

CR2E037 (9/96)