


**SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.
AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)**

**FILED
Aug 14 1997 8:00am
Secretary of State**

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P93000002851 (2)
 1. Corporation Name
COURTYARD AT WINTER PARK APARTMENTS, INC.



Principal Place of Business 2160-650 W GEORGIA ST VANCOUVER, B.C. CANADA	Mailing Address 2160-650 W GEORGIA ST VANCOUVER, B.C. CANADA
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 Suite, Apt. #, etc. 23 City & State 24 Zip Country	2a. Mailing Address 27 Suite, Apt. #, etc. 28 City & State 29 Zip Country
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3. Date Incorporated or Qualified 01/13/1993	3a. Date of Last Report 02/29/1996
4. FEI Number 98-0136691	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent

**C T CORPORATION SYSTEM
1200 S PINE ISLAND RD
PLANTATION FL 33324**

10. Name and Address of New Registered Agent

81 Name	85 Zip Code
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	FL

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> DELETE
NAME	CASSILS, JOHN G	
STREET ADDRESS	3095 POINT GREY RD	
CITY-ST-ZIP	VANCOUVER B.C. CD	
TITLE	D	<input type="checkbox"/> DELETE
NAME	MACKAY, JOHN D	
STREET ADDRESS	2280 SW MARINE DR	
CITY-ST-ZIP	VANCOUVER B.C. CD	
TITLE	D	<input type="checkbox"/> DELETE
NAME	JOHNSTON, JAMES A	
STREET ADDRESS	3551 E 3RD AVE	
CITY-ST-ZIP	VANCOUVER B.C. CD	
TITLE	D	<input type="checkbox"/> DELETE
NAME	SAUNDERS, ROD G	
STREET ADDRESS	944 TOLL CROSS ROAD	
CITY-ST-ZIP	NORTH VANCOUVER BC CD	
TITLE	D	<input type="checkbox"/> DELETE
NAME	FRITS ALBADA JELGERSMA	
STREET ADDRESS	1221 LEXINGTON COURT	
CITY-ST-ZIP	EL DORADO HILLS, CA 95630	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	D
5.3 STREET ADDRESS	FRITS ALBADA JELGERSMA
5.4 CITY-ST-ZIP	1221 LEXINGTON COURT
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	EL DORADO HILLS, CA 95630
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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: **ROD G SAUNDERS** *[Signature]* 31 Jul 97 (604) 687-1919

CR2E034 (4/97)