

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # P93000071091 (1)
1. Corporation Name
REGENCY ISLAND DUNES, INC.

Principal Place of Business
2601 S BAYSHORE DR
9TH FLOOR, LEGAL DEPT.
MIAMI FL 33133

Mailing Address
2601 S BAYSHORE DR
9TH FLOOR, LEGAL DEPT.
MIAMI FL 33133

FILED

98 JAN 18 PM 3:51

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.
22	City & State	27	City & State
23	Zip	28	Zip
24	Country	29	Country

3. Date Incorporated or Qualified 10/13/1993	
4. FEI Number 65-0445386	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" 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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
GOLDMAN, JOEL K 2601 S BAYSHORE DR MIAMI FL 33133		81 Name	
		82 Street Address (P.O. Box Number is Not Acceptable)	
		83	
		84 City	FL 85 Zip Code

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

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RUTHERFORD, J LARRY	1.2 NAME	
STREET ADDRESS	2601 S BAYSHORE DR 9TH FLOOR	1.3 STREET ADDRESS	300002439463--4
CITY-ST-ZIP	MIAMI FL 33133-5461	1.4 CITY-ST-ZIP	-02/24/98--01066--009
TITLE	VSD	2.1 TITLE	****158.75 ****158.75
NAME	GOLDMAN, JOEL K.	2.2 NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	2601 S BAYSHORE DR	2.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL	2.4 CITY-ST-ZIP	
TITLE	VAS	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LANGLEY, MARCIA H	3.2 NAME	
STREET ADDRESS	2601 S BAYSHORE DR 9TH FLOOR	3.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL	3.4 CITY-ST-ZIP	
TITLE	VT	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FISCHER, JOHN H	4.2 NAME	
STREET ADDRESS	2601 S BAYSHORE DR 9TH FLOOR	4.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33133-5461	4.4 CITY-ST-ZIP	
TITLE	DV	5.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	JEFFERY, THOMAS W	5.2 NAME	
STREET ADDRESS	2601 S BAYSHORE DR	5.3 STREET ADDRESS	V
CITY-ST-ZIP	MIAMI FL	5.4 CITY-ST-ZIP	Laguardia, John
TITLE	VCAS	6.1 TITLE	2601 S. Bayshore Drive
NAME	CARLETON, CALLIS N.	6.2 NAME	Miami, Florida 33133
STREET ADDRESS	2601 S BAYSHORE DR	6.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL	6.4 CITY-ST-ZIP	

14. I 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: _____

CR2E034 (10/97)