

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # P95000002495 (6)

1. Corporation Name  
**ALOHA KAI VACATION RENTALS, INC.**



Principal Place of Business: 6020 MIDNIGHT PASS ROAD SARASOTA FL 34242-3212  
Mailing Address: 6020 MIDNIGHT PASS ROAD SARASOTA FL 34242-3212

3. Date Incorporated or Qualified: 01/09/1995  
3a. Date of Last Report  
4. FEI Number: 65-0547718  
Applied For: Not Applicable  
5. Certificate of Status Desired:  \$8.75 Additional Fee Required  
6. Election Campaign Financing:  \$5.00 Added to Fees  
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes:  Yes  No

2. Principal Place of Business: 21  
2a. Mailing Address: 26  
Suite, Apt. #, etc.: 22  
City & State: 27  
Zip: 24 Country: 25  
Zip: 29 Country: 30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**BALL, RUTH A  
7425 BOUNTY DRIVE  
SARASOTA FL 34231-7921**

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 607.1505, 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, if not applicable. (NOTE: Registered Agent signature required when translating.) DATE:

12. OFFICERS AND DIRECTORS

TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
12 NAME	TD
13 STREET ADDRESS	RUSSELL PEDERSON
14 CITY-ST-ZIP	4559 DEER CREEK BLVD SARASOTA FL 34238
2. TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
22 NAME	SD
23 STREET ADDRESS	SCHNEFERT, CHRISTINE
24 CITY-ST-ZIP	888 BLVD OF THE ARTS, #1002 SARASOTA, FL
3. TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
32 NAME	VD
33 STREET ADDRESS	CHADWICK, JON D
34 CITY-ST-ZIP	6456 MCKOWN RD SARASOTA, FL
4. TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
42 NAME	VD
43 STREET ADDRESS	ALLISON, MARJORIS
44 CITY-ST-ZIP	5728 ANTIBES ST SARASOTA, FL
5. TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
52 NAME	PD
53 STREET ADDRESS	BALL, RUTH A.
54 CITY-ST-ZIP	7425 BOUNTY DRIVE SARASOTA, FL 34231
6. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME	700001828687
63 STREET ADDRESS	-05/20/96--01032--010
64 CITY-ST-ZIP	***200.00

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 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: *Russell Pederson* TREASURER 7-15-96 941-349-5410  
SIGNATURE AND TYPED OR PRINTED NAME OF OFFICER OR DIRECTOR

CR2E034 (12/95)