

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

FILED
Jul 19 1996 8:00 am
Secretary of State

DOCUMENT # **S22288** (2)

1. Corporation Name

PONDVIEW STUD SOUTH, INC.

Principal Place of Business

**15048 NORRIS BISHOP LOOP ROAD
BROOKSVILLE FL 34614-0813**

Mailing Address

**15048 NORRIS BISHOP LOOP ROAD
BROOKSVILLE FL 34614-0813**



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 01/01/1991		3a. Date of Last Report 05/01/1995	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 59-3046505		<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
22	City & State	27	City & State	5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
23	Zip	28	Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
24	Country	29	Country	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No			
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
GASDICK, MICHAEL J. 255 S. ORANGE AVE. #1486 ORLANDO FL 32801				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 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	PV	11 TITLE	
NAME	SANTOPIETRO, RUDOLPH	12 NAME	
STREET ADDRESS	15048 NORRIS BISHOP LOOP	13 STREET ADDRESS	
CITY-ST-ZIP	BROOKSVILLE FL	14 CITY-ST-ZIP	
TITLE	TD	21 TITLE	
NAME	ATTAR, DIBO	22 NAME	
STREET ADDRESS	15048 NORRIS BISHOP LOOP	23 STREET ADDRESS	
CITY-ST-ZIP	BROOKSVILLE FL	24 CITY-ST-ZIP	
TITLE	TD	31 TITLE	
NAME	SANTOPIETRO, ANN	32 NAME	
STREET ADDRESS	15048 NORRIS BISHOP LOOP	33 STREET ADDRESS	
CITY-ST-ZIP	BROOKSVILLE, FL	34 CITY-ST-ZIP	
TITLE		41 TITLE	
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY-ST-ZIP		44 CITY-ST-ZIP	
TITLE		51 TITLE	
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY-ST-ZIP		54 CITY-ST-ZIP	
TITLE		61 TITLE	
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY-ST-ZIP		64 CITY-ST-ZIP	

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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed for or on an attachment with an address.

SIGNATURE:

Rudolph Santopietro
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6/29/96
DATE

352-1799 3139
EXPIRATION DATE

CR2E034 (3/96)