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Jan 31 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997



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

DOCUMENT # 759448 (4)

1. Corporation Name

EAGLE'S NEST CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business

Mailing Address

402 HIGH PT DR
COCOA FL 32926
US

402 HIGH PT DR
COCOA FL 32926-6635
US

3. Date Incorporated or Qualified
08/04/1981

3a. Date of Last Report
01/31/1996

2. Principal Place of Business

2a. Mailing Address

21 EAGLE'S NEST

26 EAGLE'S NEST

4. FEI Number
59-2789307

Applied For
Not Applicable

22 1513 N. HARBOR CITY BLVD

27 1513 N. HARBOR CITY BLVD

5. Certificate of Status Desired

\$8.75 Additional Fee Required

23 Melbourne, FL

28 Melbourne, FL

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

24 32935 25 U.S.A.

29 32935 30 U.S.A.

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MAKOWSKI, EDWARD J
1225 N WICKHAM ROAD
SUITE 721
MELBOURNE FL 32935

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 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 PD DELETE
NAME MAKOWSKI, EDWARD
STREET ADDRESS 1225 N WICKHAM RD S721
CITY-ST-ZIP MELBOURNE FL

1.1 TITLE Change Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

TITLE VD DELETE
NAME JUSTICE, JI
STREET ADDRESS 1225 N WICKHAM RD S416
CITY-ST-ZIP MELBOURNE FL

2.1 TITLE Change Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE STD DELETE
NAME WHITTINGTON, DEE
STREET ADDRESS 1225 N WICKHAM ROAD, #815
CITY-ST-ZIP MELBOURNE FL

3.1 TITLE Change Addition
3.2 NAME HOWARD WENDEBORN
3.3 STREET ADDRESS 1225 N. WICKHAM Rd. # 324
3.4 CITY-ST-ZIP Melbourne, FL. 32935

TITLE DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE Change Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE Change Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE Change Addition
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: Edward J. Makowski - EDWARD J. MAKOWSKI

1/23/97 (407) 255-9629

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

Daytime Phone # 0019135

CF2E037 (9/96)