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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 # 763580 (8)

1. Corporation Name
OAK PLAZA CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business	Mailing Address
% MARK AANONSON 700 W. OAK STREET KISSIMEE FL 34741 US	% MARK AANONSON 700 W. OAK STREET KISSIMEE FL 34741-4900 US

3. Date Incorporated or Qualified 06/07/1982	3a. Date of Last Report 02/05/1996
4. FEI Number 59-2213361	Applied For 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 has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc.	Suite, Apt. #, etc.
22	27
City & State	City & State
23	28
Zip	Country
24	25
29	30

9. Name and Address of Current Registered Agent
AANONSON, MARK
700 W. OAK ST.
KISSIMEE FL 32741

10. Name and Address of New Registered Agent

81 Name E. Tim Cook
82 Street Address (P.O. Box Number is Not Acceptable) 700 West Oak Street
83
84 City Kissimmee
85 State FL
Zip Code 34741

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 E. Tim Cook (Signature, typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when reinstating) DATE 1/23/97

12. OFFICERS AND DIRECTORS

TITLE	PD	<input checked="" type="checkbox"/> DELETE
NAME	PATTERSON, HOWARD K.	
STREET ADDRESS	201 W MAIN ST	
CITY-ST-ZIP	LOUISVILLE KY	
TITLE	PD	<input type="checkbox"/> DELETE
NAME	PATTERSON, HOWARD K.	
STREET ADDRESS	ONE PARK PLAZA	
CITY-ST-ZIP	NASHVILLE TN	
TITLE	VD	<input checked="" type="checkbox"/> DELETE
NAME	AANONSON, MARK	
STREET ADDRESS	700 W. OAK ST.	
CITY-ST-ZIP	KISSIMEE FL	
TITLE	STD	<input checked="" type="checkbox"/> DELETE
NAME	BRAMMER, SHERI	
STREET ADDRESS	700 WEST OAK STREET	
CITY-ST-ZIP	KISSIMEE FL	
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

1.1 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 checked="" type="checkbox"/> Addition
3.2 NAME	E. Tim Cook
3.3 STREET ADDRESS	700 West Oak Street
3.4 CITY-ST-ZIP	Kissimmee, Florida 34741
4.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.2 NAME	Robert W. Jones
4.3 STREET ADDRESS	700 West Oak Street
4.4 CITY-ST-ZIP	Kissimmee, Florida 34741
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> 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: E. Tim Cook (Signature and typed or printed name of signing officer or director) DATE 1/23/97 (407) 933-3601 (Daytime Phone # 0069786)

CR2E037 (9/96)