

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

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **K61543 (0)**

1. Corporation Name
SABAL BAY, INC.



Principal Place of Business: % JOHN K. AURELL, 101 N. MONROE ST., STE 1000-MONROE PRK TWR, TALLAHASSEE FL 32301
Mailing Address: % JOHN K. AURELL, 101 N. MONROE ST., STE 1000-MONROE PRK TWR, TALLAHASSEE FL 32301

3. Date Incorporated or Qualified: **01/27/1989**
3a. Date of Last Report: **03/13/1995**
4. FET Number: **NOT APPLICABLE**
5. Certificate of Status Desired: \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

2. Principal Place of Business (21-24) and 2a. Mailing Address (26-30) fields with sub-headers for Suite, Apt. #, etc., City & State, Zip, and Country.

9. Name and Address of Current Registered Agent: **AURELL, JOHN K., 101 NORTH MONROE STREET, SUITE 1000 - MONROE PARK TOWER, TALLAHASSEE FL 32302**
10. Name and Address of New Registered Agent (81-84) fields for Name, Street Address, City, and Zip Code (FL 85).

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 fields for the corporation and the registered agent.

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE: D	COLLIER, MILES C.	1.1 TITLE:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME:	3003 TAMiami TRAIL NORTH	1.2 NAME:	
STREET ADDRESS:	NAPLES FL	1.3 STREET ADDRESS:	
CITY - ST - ZIP:		1.4 CITY - ST - ZIP:	
TITLE: D	BIRR, JEFFREY M.	2.1 TITLE:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME:	3003 TAMiami TRAIL NORTH	2.2 NAME:	
STREET ADDRESS:	NAPLES FL	2.3 STREET ADDRESS:	
CITY - ST - ZIP:		2.4 CITY - ST - ZIP:	
TITLE:		3.1 TITLE:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME:		3.2 NAME:	
STREET ADDRESS:		3.3 STREET ADDRESS:	
CITY - ST - ZIP:		3.4 CITY - ST - ZIP:	
TITLE:		4.1 TITLE:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME:		4.2 NAME:	
STREET ADDRESS:		4.3 STREET ADDRESS:	
CITY - ST - ZIP:		4.4 CITY - ST - ZIP:	
TITLE:		5.1 TITLE:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME:		5.2 NAME:	
STREET ADDRESS:		5.3 STREET ADDRESS:	700001876837
CITY - ST - ZIP:		5.4 CITY - ST - ZIP:	-06/26/96--01116--017
TITLE:		6.1 TITLE:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME:		6.2 NAME:	
STREET ADDRESS:		6.3 STREET ADDRESS:	***200.00
CITY - ST - ZIP:		6.4 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 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: _____ Date: **4/20/96**

CR2E034 (12/95)