

FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # N09992 (1)

1. Corporation Name

THE A1A CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business

Mailing Address

2780 S HWY A1A
1825 SOUTH RIVERVIEW DRIVE
MELBOURNE BEACH FL 32951
US

C/O BRUCE A. MITCHELL, ESO
1825 SOUTH RIVERVIEW DRIVE
MELBOURNE FL 32901

3. Date Incorporated or Qualified
06/27/1985

3a. Date of Last Report
04/07/1995

2. Principal Place of Business

2a. Mailing Address

21 **2780 S. Hwy A1A**

26

4. FEI Number
59-2543105

Applied For
Not Applicable

22 Suite, Apt. #, etc.

27 Suite, Apt. #, etc.

5. Certificate of Status Desired

\$8.75 Additional Fee Required

23 City & State

28 City & State

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

24 Zip **32951**

25 Country **Brevard**

29 Zip

30 Country

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

MITCHELL, BRUCE A
1825 SOUTH RIVERVIEW DRIVE
MELBOURNE FL 32901

81 Name

Jim Reinman

82 Street Address (P.O. Box Number is Not Acceptable)

1825 S. Riverview Dr.

83

84 City

Melbourne

FL

85 Zip Code
32901

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

Jim Reinman

James R. Reinman

4/11/96
DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	WHEELER, NORMAN	
STREET ADDRESS	2780 S. HWY. A1A #190	
CITY - ST - ZIP	MELBOURNE BCH. FL 32951	
TITLE	TD	<input type="checkbox"/> DELETE
NAME	BALLAS, PHYLLIS	
STREET ADDRESS	2780 S HWY A1A #133	
CITY - ST - ZIP	MELBOURNE BCH FL	
TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	WHAN, ANN	
STREET ADDRESS	2780 S. HWY. A1A #63	
CITY - ST - ZIP	MELBOURNE FL 32951	
TITLE	VD	<input type="checkbox"/> DELETE
NAME	WHITCHER, MARTHA	
STREET ADDRESS	2780 S HWY A1A #109	
CITY - ST - ZIP	MELBOURNE BEACH FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	ZIMMERMAN, JOHN	
STREET ADDRESS	2780 S. HWY A1A #120	
CITY - ST - ZIP	MELBOURNE BCH. FL 32951	
TITLE	PD	<input type="checkbox"/> DELETE
NAME	ZIEMIANSKI, EDWARD	
STREET ADDRESS	2780 S HWY A1A #25	
CITY - ST - ZIP	MELBOURNE BCH FL	

1. TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	Roger Mulholland	
1.3 STREET ADDRESS	2780 S. Hwy A1A #118	
1.4 CITY - ST - ZIP	Melbourne Bch, FL 32951	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	John Ryan	
3.3 STREET ADDRESS	2780 S. Hwy A1A #26	
3.4 CITY - ST - ZIP	Melbourne Bch, FL 32951	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY - ST - ZIP		
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 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, or on an attachment with an address

SIGNATURE:

Edward Ziemianski

Edward Ziemianski, Pres. 4/11/96

723-3472

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

By the Printer

CR2E037 (12/95)