

FILE NOW: FILING FEE IS \$61.25

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Apr 07 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N95000002535 (1)**

1. Corporation Name

BANANA POINT HOMEOWNERS ASSOCIATION, INC.

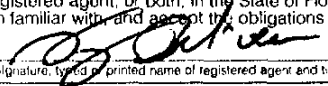


Principal Place of Business 1100 MAIN STREET LADY LAKE FL 32159	Mailing Address 1100 MAIN STREET LADY LAKE FL 32159-7719
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2. Principal Place of Business 21 5130 Banana Point Drive		2a. Mailing Address 26 5130 Banana Point Drive		3. Date Incorporated or Qualified 05/30/1995	3a. Date of Last Report 03/14/1996
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number 59-3318647	Applied For <input type="checkbox"/> Not Applicable
City & State 22 Okahumpka, FL		City & State 27 Okahumpka, FL		5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
Zip 24 34762		Zip 25 Lake		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
Country 29 34762		Country 30 Lake		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 BURNSD, R. DEWEY 1100 MAIN STREET LADY LAKE FL 32159		10. Name and Address of New Registered Agent	
		81 Name Gregory A. Beliveau	
		82 Street Address (P.O. Box Number is Not Acceptable) 5130 Banana Point Drive	
		83	
		84 City Okahumpka, FL	85 Zip Code 34762

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  **Gregory A. Beliveau** DATE **3/22/97**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE D	BURNSD, R. DEWEY <input checked="" type="checkbox"/> DELETE	1.1 TITLE D/P	Gregory A. Beliveau <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		1.2 NAME	
STREET ADDRESS 5549 BANANA POINT DRIVE		1.3 STREET ADDRESS 5130 Banana Point Drive	
CITY-ST-ZIP OKAHUMPKA FL 34762		1.4 CITY-ST-ZIP Okahumpka, FL 34762	
TITLE D	MCLIN, WALTER S III <input checked="" type="checkbox"/> DELETE	2.1 TITLE D/V/T	Caroline Carter <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		2.2 NAME	
STREET ADDRESS 5415 BANANA POINT DRIVE		2.3 STREET ADDRESS 35419 Fox Run Circle	
CITY-ST-ZIP OKAHUMPKA FL 34762		2.4 CITY-ST-ZIP Eustis, FL 32736	
TITLE D	BURNSD, LYNN <input checked="" type="checkbox"/> DELETE	3.1 TITLE D/S	Cathy B. Roy <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS 5549 BANANA POINT DRIVE		3.3 STREET ADDRESS 5101 Banana Point Drive	
CITY-ST-ZIP OKAHUMPKA FL 34762		3.4 CITY-ST-ZIP Okahumpka, FL 34762	
TITLE	<input type="checkbox"/> DELETE	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	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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:  **Gregory A. Beliveau** DATE **3/22/97**

CR2E037 (9/96)