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**Mar 05 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 # N95000003324 (9)

1. Corporation Name
VACATION VILLAGE AT BONAVENTURE MASTER OWNERS ASSOCIATION, INC.



Principal Place of Business 3015 NORTH OCEAN BLVD. SUITE 121 FORT LAUDERDALE FL 33308	Mailing Address 3015 NORTH OCEAN BLVD. SUITE 121 FORT LAUDERDALE FL 33308-7300
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3. Date Incorporated or Qualified 07/13/1995	3a. Date of Last Report 06/14/1996
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2. Principal Place of Business 21 401 Racquet Club Road Suite, Apt. #, etc. 22 Ft. Lauderdale, Fl 33326 City & State 23 Ft. Lauderdale, Fl 33326 Zip Country 24 33326 25	2a. Mailing Address 26 401 Racquet Club Road Suite, Apt. #, etc. 27 Ft. Lauderdale, Fl 33326 City & State 28 Ft. Lauderdale, Fl 33326 Zip Country 29 33326 30	4. FEI Number 65-0618603 Applied For <input type="checkbox"/> 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

9. Name and Address of Current Registered Agent
**GREENSPOON, MARDER, HIRSCHFELD & RAFKIN, PA
1704 NORTH OCEAN BLVD.
STE 3005 B
POMPANO BEACH FL 33062**

10. Name and Address of New Registered Agent

81 Name	85 Zip Code
82 Street Address (P.O. Box Number is Not Acceptable)	FL
83	
84 City	

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> DELETE
NAME	OTTINO, J. P	
STREET ADDRESS	3015 N. OCEAN BLVD., SUITE 121	
CITY - ST - ZIP	FORT LAUDERDALE FL 33308	
TITLE	VD	<input type="checkbox"/> DELETE
NAME	FOSTER, REBECCA	
STREET ADDRESS	3015 NORTH OCEAN BLVD., SUITE 121	
CITY - ST - ZIP	FORT LAUDERDALE FL 33308	
TITLE	STD	<input type="checkbox"/> DELETE
NAME	FEIRSTEIN, JANICE	
STREET ADDRESS	3015 NORTH OCEAN BLVD., SUITE 121	
CITY - ST - ZIP	FORT LAUDERDALE FL 33308	
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 type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
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 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: *[Signature]* DATE: **2/27/97**

CR2E037 (9/96)