

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED
May 01 1997 8:00am
Secretary of State



PROFIT CORPORATION
 ANNUAL REPORT
 1997

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

DOCUMENT # 199295 (7)
 1. Corporation Name
SEA TOWER APARTMENTS, INC.



Principal Place of Business
**2840 NORTH OCEAN BLVD
 FT LAUDERDALE FL 33308**

Mailing Address
**2840 NORTH OCEAN BLVD
 FT LAUDERDALE FL 33308-7579**

3. Date Incorporated or Qualified
01/23/1957

3a. Date of Last Report
05/01/1996

4. FEI Number
59-0830092

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 Suite, Apt #, etc
 22 City & State
 23 Zip Country
 24 25

2a. Mailing Address
 26 Suite, Apt #, etc.
 27 City & State
 28 Zip Country
 29 30

9. Name and Address of Current Registered Agent
**FOLEY, GORDON
 2840 N. OCEAN BLVD
 SUITE 607
 FT. LAUDERDALE FL 33308**

10. Name and Address of New Registered Agent
 81 Name **Goldsmith, Nancy**
 82 Street Address (P.O. Box Number is Not Acceptable)
2840 N. Ocean Blvd
 83 **Suite # 602**
 84 City **Fort Lauderdale** FL 85 **33308**

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 *Nancy M. Goldsmith* DATE **April 25/97**

12. OFFICERS AND DIRECTORS

TITLE	P	<input type="checkbox"/> DELETE
NAME	HEUTLE, RUTH	
STREET ADDRESS	2840 N OCEAN BLVD #305	
CITY-ST-ZIP	FT. LAUDERDALE FL	
TITLE	VP	<input type="checkbox"/> DELETE
NAME	GRAY, ANGELA	
STREET ADDRESS	2840 N. OCEAN BLVD #1009	
CITY-ST-ZIP	FT. LAUDERDALE FL	
TITLE	M	<input type="checkbox"/> DELETE
NAME	RICCI, WILLIAM	
STREET ADDRESS	2840 N OCEAN BLVD #702	
CITY-ST-ZIP	FT. LAUDERDALE FL	
TITLE	T	<input type="checkbox"/> DELETE
NAME	PIHULIC, RICHARD	
STREET ADDRESS	2840 N. OCEAN BLVD #709	
CITY-ST-ZIP	FT LAUDERDALE FL	
TITLE	M	<input checked="" type="checkbox"/> DELETE
NAME	SPINKS, KEN C.	
STREET ADDRESS	2840 N OCEAN BLVD #1003	
CITY-ST-ZIP	FT LAUDERDALE FL	
TITLE	S	<input checked="" type="checkbox"/> DELETE
NAME	MOORE, ELEANOR	
STREET ADDRESS	2840 N OCEAN BLVD	
CITY-ST-ZIP	FT LAUDERDALE FL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	President	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	Buttinger, Fred	
1.3 STREET ADDRESS	2840 N. Ocean Blvd., # 1005	
1.4 CITY-ST-ZIP	Fort Lauderdale, FL 33308	
2.1 TITLE	Vice President	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	Heutle, Ruth	
2.3 STREET ADDRESS	2840 N. Ocean Blvd.	
2.4 CITY-ST-ZIP	Fort Lauderdale, FL 33308	
3.1 TITLE	T	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	Gray, Angela	
3.3 STREET ADDRESS	2840 N. Ocean Blvd., # 1008	
3.4 CITY-ST-ZIP	Fort Lauderdale, FL 33308	
4.1 TITLE	M	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	PIHULIC, Richard	
4.3 STREET ADDRESS	2840 N. Ocean Blvd. # 709	
4.4 CITY-ST-ZIP	Fort Lauderdale, FL 33308	
5.1 TITLE	Member	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
5.2 NAME	Trotter, Andre	
5.3 STREET ADDRESS	2840 N. Ocean Blvd. # 908	
5.4 CITY-ST-ZIP	Fort Lauderdale, FL 33308	
6.1 TITLE	Secretary	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
6.2 NAME	Goldsmith, Nancy	
6.3 STREET ADDRESS	2840 N. Ocean Blvd. # 602	
6.4 CITY-ST-ZIP	Fort Lauderdale, FL 33308	

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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Nancy M. Goldsmith*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE: **April 25/97**
 DATE

CR2E034 (9/96)