

**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 # 707577 (3)

1. Corporation Name

JEFFERSON PARK, INC., A CONDOMINIUM



Principal Place of Business

Mailing Address

~~1498 JEFFERSON AVE~~  
~~MIAMI BEACH FL 33139-3856~~

1498 JEFFERSON AVE  
MIAMI BEACH FL 33139-3856

3. Date Incorporated or Qualified

07/13/1964

3a. Date of Last Report

08/07/1995

2. Principal Place of Business

2a. Mailing Address

21 Summit Prop. Mgmt.  
Suite, Apt. #, etc.

26 P.O. Box 189013  
Suite, Apt. #, etc.

22 P.O. Box 189013  
City & State

27  
City & State

23 Plantation, FL  
City & State

28 Plantation, FL  
City & State

24 33318 Zip Country  
USA

29 33318 Zip Country  
USA

4. FEI Number

59-1104478

Applied For

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

~~BORSKY, JAY~~  
~~1498 JEFFERSON AVE~~  
~~APT 508-A~~  
~~MIAMI BEACH FL 33139~~

81 Name Summit Prop. Mgmt.  
82 Street Address (P.O. Box Number is Not Acceptable) 6289 W. Sunrise Blvd.  
83 # 202  
84 City Sunrise FL 85 33313

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

*[Signature]*

Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	<del>D</del>	<input checked="" type="checkbox"/> DELETE
NAME	KRUM, ALEXANDER	
STREET ADDRESS	<del>1498 JEFFERSON AVE</del>	
CITY-ST-ZIP	<del>MIAMI BEACH FL</del>	
TITLE	SD	<input type="checkbox"/> DELETE
NAME	SANTANA, MARIA	
STREET ADDRESS	1498 JEFFERSON AVE	
CITY-ST-ZIP	MIAMI BEACH FL	
TITLE	<del>VD</del>	<input checked="" type="checkbox"/> DELETE
NAME	PFEFFER, HELEN	
STREET ADDRESS	1498 JEFFERSON AVE APT 502	
CITY-ST-ZIP	MIAMI BCH, FL 00000	
TITLE	<del>TD</del>	<input checked="" type="checkbox"/> DELETE
NAME	SERRA, ANNA	
STREET ADDRESS	1498 JEFFERSON AVE	
CITY-ST-ZIP	MIAMI BCH, FL 00000	
TITLE	<del>D</del>	<input checked="" type="checkbox"/> DELETE
NAME	PFEFFER, HELEN	
STREET ADDRESS	1498 JEFFERSON AVE	
CITY-ST-ZIP	MIAMI BEACH FL	
TITLE	PD	<input type="checkbox"/> DELETE
NAME	BORSKY, JAY	
STREET ADDRESS	1498 JEFFERSON AVE APT 508-A	
CITY-ST-ZIP	MIAMI BEACH FL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN '92

11 TITLE	VD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	Paula Koon	
13 STREET ADDRESS	1498 Jefferson Ave., 201	
14 CITY-ST-ZIP	Miami Beach, FL	
21 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME		
23 STREET ADDRESS		
24 CITY-ST-ZIP		
31 TITLE	VD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME	Bertha Bernstein	
33 STREET ADDRESS	1498 Jefferson Ave., #206	
34 CITY-ST-ZIP	Miami Beach, FL	
41 TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME	Carolyn Arena	
43 STREET ADDRESS	1498 Jefferson Ave., #203	
44 CITY-ST-ZIP	Miami Beach, FL	
51 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME		
53 STREET ADDRESS		
54 CITY-ST-ZIP		
61 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME		
63 STREET ADDRESS		
64 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:

*Bertha Bernstein*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (12/95)