FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT 1995

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

APPROVED AND FILED
'95 MAR 21 PM 3:42
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 710297 (3)

1. Corporation Name
TIARA EAST CONDOMINIUM, INC.

Principal Place of Business	Mailing Address
333 NORTH OCEAN BLVD DEERFIELD BEACH FL 33441	333 NORTH OCEAN BLVD DEERFIELD BEACH FL 33441

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 02/03/1966
3a. Date of Last Report: 03/28/1994
4. FEI Number: 59-1119740 ☐ Applied For ☐ Not Applicable

2. Principal Place of Business	2a. Mailing Address	5. Certificate of Status Desired ☐	$8.75 Additional Fee Required
21	26		
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27	6. Election Campaign Financing Trust Fund Contribution ☐	$5.00 May Be Added to Fees
City & State 23	City & State 28	7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐	$68.75 Supplemental Fee Not Required
Zip 24 / Country 25	Zip 29 / Country 30	8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No	

9. Name and Address of Current Registered Agent

SHIPLEY, CHARLES D
333 N. OCEAN BLVD.
APT. #208
DEERFIELD BEACH FL 33441

10. Name and Address of New Registered Agent

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

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: Charles D Ship 3/14/95
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	1.1 TITLE	PD	☒ Change ☐ Addition
NAME	WATKINS, RALPH E	1.2 NAME	BLOW, EVELYN	
STREET ADDRESS	333 N. OCEAN BLVD. #1004	1.3 STREET ADDRESS	333 N. OCEAN BLVD #1506	
CITY-ST-ZIP	DEERFIELD BCH FL	1.4 CITY-ST-ZIP	DEERFIELD BCH, FLA.	
TITLE	VD	2.1 TITLE	VD	☐ Change ☒ Addition
NAME	BLOW, EVELYN	2.2 NAME	FRED A. PRINCIOTTA	
STREET ADDRESS	333 N. OCEAN BLVD. #1506	2.3 STREET ADDRESS	333 N. OCEAN BLVD. #1202	
CITY-ST-ZIP	DEERFIELD BCH FL	2.4 CITY-ST-ZIP	DEERFIELD BCH, FLA	
TITLE	SD	3.1 TITLE	ASD	☒ Change ☐ Addition
NAME	RUEL, EDWARD J SR.	3.2 NAME		
STREET ADDRESS	333 N. OCEAN BLVD. #910	3.3 STREET ADDRESS		
CITY-ST-ZIP	DEERFIELD BEACH FL	3.4 CITY-ST-ZIP		
TITLE	TD	4.1 TITLE		☐ Change ☐ Addition
NAME	FLOYD, CHARLOTTE E	4.2 NAME		
STREET ADDRESS	333 N. OCEAN BLVD. #1418	4.3 STREET ADDRESS		
CITY-ST-ZIP	DEERFIELD BEACH FL	4.4 CITY-ST-ZIP		
TITLE	ASD	5.1 TITLE	SD	☒ Change ☐ Addition
NAME	TEST, FREDERICK	5.2 NAME		
STREET ADDRESS	333 N. OCEAN BLVD.	5.3 STREET ADDRESS		
CITY-ST-ZIP	DEERFIELD BEACH FL	5.4 CITY-ST-ZIP		
TITLE		6.1 TITLE		☐ Change ☐ 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 is voluntarily furnished and 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: X Evelyn J. Blow 3/14/95 305/427-6776
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0018238