

FILE NOW: FILING FEE IS \$61.25

FILED  
May 19 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 # 713079 (2)  
1. Corporation Name  
THE GALLEON CONDOMINIUM APARTMENTS, INC.



Principal Place of Business Mailing Address  
4100 GALT OCEAN DR. FT. LAUDERDALE FL 33308  
4100 GALT OCEAN DR. FT. LAUDERDALE FL 33308-6002

2. Principal Place of Business 2a. Mailing Address  
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.  
22 City & State 27 City & State  
23 Zip Country 28 Zip Country  
24 25 29 30

3. Date Incorporated or Qualified 07/18/1967 3a. Date of Last Report 02/15/1996  
4. FEI Number 59-1169594 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  
SNYDER, SARAH E.  
4100 GALT OCEAN DR  
APT. 604  
FT LAUDERDALE FL 33308

10. Name and Address of New Registered Agent  
81 Name HARWOOD, EDWARD  
82 Street Address (P.O. Box Number is Not Acceptable) 4100 GALT OCEAN DRIVE, #614  
83  
84 City FT. LAUDERDALE FL 85 Zip Code 33308

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]* DATE: 5/12/97  
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE	P	<input checked="" type="checkbox"/> DELETE
NAME	SYNDER, SARAH E.	
STREET ADDRESS	4100 GALT OCEAN DR #604	
CITY-ST-ZIP	FT LAUDERDALE FL	
TITLE	V	<input type="checkbox"/> DELETE
NAME	CHIRILLO, JACK	
STREET ADDRESS	4100 GALT OCEAN DRIVE, #605	
CITY-ST-ZIP	FT. LAUDERDALE FL	
TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	CREWS, DOLPH	
STREET ADDRESS	4100 GALT OCEAN DRIVE, 1407	
CITY-ST-ZIP	FT. LAUDERDALE FL	
TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	COCKS, ERIC H.	
STREET ADDRESS	4100 GALT OCEAN DR #712	
CITY-ST-ZIP	FT LAUDERDALE FL	
TITLE	S	<input checked="" type="checkbox"/> DELETE
NAME	HODDER, BEVERLY	
STREET ADDRESS	4100 GALT OCEAN DRIVE, #510	
CITY-ST-ZIP	FT. LAUDERDALE FL	
TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	MCCLINE, ROBERT M	
STREET ADDRESS	4100 GALT OCEAN DRIVE, 304	
CITY-ST-ZIP	FT. LAUDERDALE FL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	P	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	HARWOOD, EDWARD	
1.3 STREET ADDRESS	4100 GALT OCEAN DRIVE #614	
1.4 CITY-ST-ZIP	FT. LAUDERDALE, FL 33308	
2.1 TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE	V	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	LIPSHULTZ, MITCHELL	
3.3 STREET ADDRESS	4100 GALT OCEAN DRIVE, #1601	
3.4 CITY-ST-ZIP	FT. LAUDERDALE, FL 33308	
4.1 TITLE	T	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.2 NAME	HENNEN, JOHN	
4.3 STREET ADDRESS	4100 GALT OCEAN DRIVE, #509	
4.4 CITY-ST-ZIP	FT. LAUDERDALE, FL 33308	
5.1 TITLE	S	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
5.2 NAME	MALLON, ROSE ELLEN	
5.3 STREET ADDRESS	4100 GALT OCEAN DRIVE, #811	
5.4 CITY-ST-ZIP	FT. LAUDERDALE, FL 33308	
6.1 TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
6.2 NAME	ASTOR, MICHAEL	
6.3 STREET ADDRESS	4100 GALT OCEAN DRIVE, #911	
6.4 CITY-ST-ZIP	FT. 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)(f), 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 unchanged, or on an attachment with an address.

SIGNATURE: *[Signature]* DATE: 04/17/97 954-563-2497  
SIGNATURE AND TITLE OF REGISTERED AGENT, OFFICER OR DIRECTOR Daytime Phone # 0084283

CR2E037 (9/96)



The Galleon Condominium Apartments, Inc., 4100 Galt Ocean Drive, Fort Lauderdale, Florida 33308  
(954) 563-2497 • Fax: (954) 563-9505

April 17, 1997

RE: Corporation Annual Report 1997

Block 12 Additional Officers & Directors

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Wallace Brewer  
4100 Galt Ocean Drive, #1606  
Ft. Lauderdale, FL 33308

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Sigmund Brenner  
4100 Galt Ocean Drive #901  
Ft. Lauderdale, FL 33308

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D

Michael Mullne  
4100 Galt Ocean Drive #1414  
Ft. Lauderdale, FL 33308