

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 # 715624 (3)

1. Corporation Name
COLONIAL MANOR EAST APARTMENTS CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business: ASSOCIATION, INC. 2500 N.E. 9TH STREET FT. LAUDERDALE FL 33304
Mailing Address: ASSOCIATION, INC. 2500 N.E. 9TH STREET FT. LAUDERDALE FL 33304

3. Date Incorporated or Qualified: 11/22/1968
3a. Date of Last Report: 03/06/1995

2. Principal Place of Business (21-24) and 2a. Mailing Address (26-30) fields with sub-headers for Suite, City & State, Zip, and Country.

4. FEI Number: 59-2161999
5. Certificate of Status Desired: \$8.75 Additional Fee Required
6. Election Campaign Financing: \$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: POLIAKOFF, GARY A, BECKER & POLIAKOFF, PA, 3111 STIRLING RD, FT LAUDERDALE FL 33310
10. Name and Address of New Registered Agent (81-85) fields for Name, Street Address, City, and Zip Code.

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: 2-1-96

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE: D	NAME: BLACK, THOMAS STREET ADDRESS: 2500 NE 9TH ST CITY-ST-ZIP: FT LAUDERDALE, FL 00000	11 TITLE: Secretary Treasurer - D	12 NAME: Black, Thomas
TITLE: D	NAME: JAMES, DEAN STREET ADDRESS: 2500 NE 9TH ST CITY-ST-ZIP: FT LAUDERDALE, FL 00000	13 STREET ADDRESS: 2500 NE. 9th St.	14 CITY-ST-ZIP: Ft. Lauderdale, FL. 33304
TITLE: D	NAME: RICH, FRANCS STREET ADDRESS: 2500 NE 9TH ST CITY-ST-ZIP: FT LAUDERDALE, FL 00000	21 TITLE: [Barcode]	22 NAME: [Barcode]
TITLE: D	NAME: BLACK, SALLY STREET ADDRESS: 2500 N.E. 9TH ST CITY-ST-ZIP: FORT LAUDERDALE FL	23 STREET ADDRESS: [Barcode]	24 CITY-ST-ZIP: [Barcode]
TITLE: D	NAME: ZORATTI, JO STREET ADDRESS: 2500 N.E. 9TH ST. CITY-ST-ZIP: FORT LAUDERDALE FL	31 TITLE: ***61.25	32 NAME: [Barcode]
TITLE: [X]DELETE	NAME: [Blank]	33 STREET ADDRESS: [Barcode]	34 CITY-ST-ZIP: [Barcode]
TITLE: [X]DELETE	NAME: [Blank]	41 TITLE: President - D	42 NAME: Black, Sally
TITLE: [X]DELETE	NAME: [Blank]	43 STREET ADDRESS: 2500 NE. 9th St.	44 CITY-ST-ZIP: Ft. Lauderdale, FL. 33304
TITLE: [X]DELETE	NAME: [Blank]	51 TITLE: Vice President - D	52 NAME: Mueller, Edward
TITLE: [X]DELETE	NAME: [Blank]	53 STREET ADDRESS: 2500 NE. 9th St.	54 CITY-ST-ZIP: Ft. Lauderdale, FL. 33304
TITLE: [X]DELETE	NAME: [Blank]	61 TITLE: [Blank]	62 NAME: [Blank]
TITLE: [X]DELETE	NAME: [Blank]	63 STREET ADDRESS: [Blank]	64 CITY-ST-ZIP: [Blank]

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: Thomas Black, Secretary Treasurer
Date: 1-27-96
Daytime Phone #: 954-564-5183

CR2E037 (12/95)