FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT #

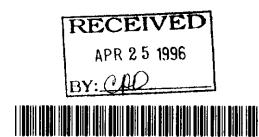
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(9)

PALM BAY TOWERS CONDOMINIUM ASSOCIATION, INCORPORATED

Principal Place of Business 720 N.E. 69TH STREET MIAMI FL 33138 Mailing Address

720 N.E. 69TH STREET MIAMI FL 33138



								1				
								3. Date Incorporated or Qualified 12/31/1968	3a. Date of Last Report 04/04/1995			
Principal Place of Business 2a. Mailing Address							4. FEI Number			Applied For		
21		26	26				59-1417287			Not Applicable		
22	Suite, Apt. #, etc.	27 S	Suite, Apt. #, etc.				5. Certificate of Status Desired \$8.75 Additional Fee Required					
23	City & State	28	City & State				6. Election Campaign Financing Trust Fund Contribution \$5,00 May Be Added to Fees					
24	Ζφ	Country 25	29	Zip Country 30				8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes				
Name and Address of Current Registered Agent							10. Name and Address of New Registered Agent					
	FLANDERS, ROBERT A 720 PALM BAY LANE					2	Name Street Addres)				
APT. 5-NORTH MIAMI FL 33138					6							
					B-		City		FL	85	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.

SIGNATI	IDE

SIGNATURE .	Signature: typed or printed name of registerop agent and title if apple about	(NOTE RE	egistered Agent signature re	required when reinstating) D	ATE	
12.	OFFICERS AND DIRECTORS		13.	ADDITIONS/CHANGES TO OFFICERS		RS IN 12
TITLE	DTA9	DELETE	1 1 TITLE	Treasurer DT	change	Add-tion
NAME	MEYER, BARBARA		12 NAME	Mey LO BARBARA	_	_
STREET ADDRESS	720 PALM BAY LANE		13 STREET ADDRESS	TEO PACE BAY LAN	2	
CITY-ST-ZIP	MIAMI FL		1.4 City-ST-ZiP	MIAMI FL 33138	_	
TITLE	 -	DELETE	2 1 TITLE	Secretary DS	Change	Add tion
NAME	BOSCH, JORGE		22 NAME	Dosca Choles		
STREET ADDRESS	720 PALM BAY LANE		2.3 STREET ADDRESS	300 PALM BAY WAVE		
CITY-ST-ZIP	MIAMI FL		2 4 CITY-ST-ZIP	MIAMI FC 33138		
TITLE	DP [DELETE	3 1 TITLE	75	 Change 	Add tion
NAME	FLANDERS, ROBERT A		3.2 NAME	FLANDERS ROBERT)	
STREET ADDRESS	720 PALM BAY LANE		3.3 STREET ADDRESS	720 PALM BAY LAM		
CITY-ST-ZIP	MIAMI FL	_	3 4. CITY - ST - ZIP	MIAMI FC 3313	87	
TITLE	DSVP	DELETE	4 1 TITLE	Vice President DVP	Change	Addition
NAME	Kaplan, ian		4 2 NAME	Linda Kaplan		
STREET ADDRESS	720 PALM BAY LANE, #155		4.3 STREET ADDRESS	720 Palm Bay Lane #	. 1945	
CITY-ST-ZIP	MIAMI FL		4.4 CITY-ST-7IP	Miami, FL 33/38	A J J	
TITLE	DVP	DELETE	51 THILE	DUD	Change	Addition
NAME	Moriber, Lloyd D		5.2 NAME			
STREET ADDRESS	720 PALM BAY LANE		5 3 STREET ADDRESS	120 PALM BAY LANG	,	
CITY-ST-ZIP	MIAMI FL		54 CITY-S1-ZIP	MIAMI (FC 331	3 5	
TITLE		DELETE	6 1 TITLE	500001848	Ghenge	☐ Add₁tion
NAME			6.2 NAME	-06/03/9601049-	-n23	
STREET ADDRESS			63 STREET ADDRESS	***61.25		
CITY-ST-ZIP			64 CITY-ST-ZIP	****U1 * CJ		

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 arrupal port or supplemental arrupal 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 opposition or the reference inverse in trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 fit ranges, or only a 3 fit in a address.

SIGNATURE:

HATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

16 17 198 (30) 757-1288 Deter 15 5/1/96 CR2E037 (12/9)