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NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT #
1. Corporation Name

717197

(8)

MAJORCA TOWERS CONDOMINIUM, INC.

Principal Place of	of Business	Mailing Address		\$ 10 E(1): 16 B B 1 (19)! 18 B D 1 110 10 10 11		
11930 NORTH BAYSHORE DRIVE N MIAMI FL 33181 US		N MIAMI FL 33181	11930 NORTH BAYSHORE DRIVE N MIAMI FL 33181 US			
00				3. Date Incorporated or Qualified 09/12/1969	3a. Date of Last Repo 06/16/1995	яt
2. Principal Place	ce of Business	2a. Mailing Address 26		4. FEI Number 59-1295138	<del>    ' '   </del>	ed For pplicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	See Required	
City & State		City & State		Election Campaign Financing     Trust Fund Contribution	□ \$5.00 Ma Added to I	•
Zip	Country	Zip	Country	8. This corporation has liability for i		.032,
24	25	29 3	D	Florida Statutes L.  10. Name and Address of New R	Yes No	· · · · · · · · · · · · · · · · · · ·
	9. Name and Address of Curren	t Hegistereo Agent	81 Name		agistored Agent	
BRAGER,	NORMAN			t Address (P.O. Box Number is Not Acceptab	le)	
11930 N BAYSHORE DR, APT PH-10			B3			
n. Miami	FL 33181					
			84 City		FL 85 Zip Cod	de
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, typed or printed name of registered agent	and title if epolicable. (NOTE: F	Registereo Agent signature	required when reinstating)	DATE	
12.	OFFICERS AN		13.	ADDITIONS/CHANGES TO OFF	ICERS AND DIRECTORS I	N 12
TITLE	T	DELETE	1.1 TITLE		Change [	] Addition
NAME	BODNER, MILDRED		1 2 NAME	BODNER, MILDRED		
STREET ADDRESS	11930 N. BAYSHORE DR.		1.3 STREET ADDRESS			
CITY-ST-ZIP	N. MIAMI FL	DELETE	1.4 CITY-ST-2IP	N. MIAMI, FL 331		Addition
TITLE	P Stern, Glenn		2.1 TITLE 2.2 NAME	BAROUCH, JAY	onunge	_ //doi.id//
NAME STREET ADDRESS	11930 N. BAYSHORE DR.		2.3 STREET ADDRESS	11020 N DAVEDODE	DR.	
CITY-ST-ZIP	N. MIAMI FL		2. 4 CITY-ST-ZIP	N. MIAMI, FL 331	81	
TITLE	\$	DELETE	3.1 TITLE	S	Change	<b>Ad</b> dition
NAME	BELL, DOLORES		3 2 NAME	BELL, DOLORES		
STREET ADDRESS	11930 N. BAYSHORE DR.		3.3 STREET ADDRESS			
CITY-ST-ZIP	N. MIAMI FL	f locusts	3.4. CITY-ST-ZIP	N. MIAMI, FL 331		Addition
TITLE	d Meyer, Norman	DELETE	4.1 TITLE	D MEYER MORMAN	□ criange L	T Valueron
NAME expect adopted	11930 N. BAYSHORE DR.		4. 2 NAME 4.3 STREET ADDRESS	MEYER, NORMAN 11930 N. BAYSHORE	nr.	
STREET ADDRESS CITY-ST-ZIP	N. MIAMI FL		4.4 CITY-ST-ZIP		181	
TITLE	D	DELETE	5.1 TITLE	D		Addition
NAME	GRINDELL, BARRY		5.2 NAME	LACEY, BERNARD		
STREET ADDRESS	11930 N. BAYSHORE DR.		5 3 STREET ADDRESS			
CITY-ST-ZIP	N. MIAMI FL	Finerese	5.4 CITY-ST-ZIP	N. MIAMI, FL 331		Addition
TITLE	V OTCOM OFFIN	DELETE	6.1 TITLE	STERN, BLENN	L_] Orlange L	T VROWOU
NAME	Stern, Glenn 11930 n. Bayshore dr.		6.2 NAME 6.3 STREET ADDRESS	11000 11 DAVOUODE	DR.	
STREET ADDRESS	MIAMI, FL 00000		6.4 CITY-ST-ZIP	MIAMI, FL 33181	, Day •	
certify that oath; that	by certify that the information supplied the information indicated on this ann I am an officer or director of the corp	iual report or supplemental annual oration or the receiver or trustee e	ed and does not q report is true and mpowered to exec	jualify for the exemption stated in Section 119 accurate and that my signature shall have the oute this report as required by Chapter 617, F	same legal effect as il ma	ae unaei
appears in Block 12 or Block 13 if changed, or on an attachment with an address.  Madded Down Trens. 5/1/9/						
SIGNATURE:  SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  Date  Detail Destination to the distribution of the distribution o						

CR2E037 (12/95)