


FILE NOW: FILING FEE IS \$61.25

FILED
Apr 20, 1999 8:00 am
Secretary of State

04-20-1999 90171 041 ****61.25

NONPROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
DOCUMENT # 719987 1. Corporation Name THE TOWERS OF KEY BISCAYNE, INC.		
Principal Place of Business 1121 CRANDON BLVD KEY BISCAYNE FL 33149	Mailing Address 1121 CRANDON BLVD KEY BISCAYNE FL 33149	



2. Principal Place of Business 21	2a. Mailing Address 26	3. Date Incorporated or Qualified 01/05/1971
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27	4. FEI Number 59-1409911 Applied For Not Applicable
City & State 23	City & State 28	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required
Zip 24	Country 25	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees
9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent
ELLEND, MAXINE S 1121 CRANDON BLVD KEY BISCAYNE FL 33149		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 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 *Maxine S. Ellend* DATE 4/9/99
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE VP	MINETTI, CARLOS 1121 CRANDON BLVD KEY BISCAYNE FL 33149 <input checked="" type="checkbox"/> DELETE	1.1 TITLE VP	Paul Coburn 1111 Crandon Blvd. Key Biscayne, FL 33149 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE P	AUCHTER, PAUL 1121 CRANDON BLVD KEY BISCAYNE FL 33149 <input type="checkbox"/> DELETE	2.1 TITLE Morris L. Deutsch	1111 Crandon Blvd Key Biscayne, FL 33149 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE DS	ELLEND, MAXINE S 1121 CRANDON BLVD KEY BISCAYNE FL <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE D	PARKER, MR. K 1121 CRANDON BLVD KEY BISCAYNE, FL 33149 <input checked="" type="checkbox"/> DELETE	4.1 TITLE Director	Marisela Blandon 1121 Crandon Blvd. Key Biscayne, FL 33149 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE D	LESSER, ALAN 1121 CRANDON BLVD KEY BISCAYNE FL 33149 <input checked="" type="checkbox"/> DELETE	5.1 TITLE Director	John Cleator 1111 Crandon Blvd. Key Biscayne, FL 33149 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE D	PAUL, ROBERT 1121 CRANDON BLVD KEY BISCAYNE FL <input checked="" type="checkbox"/> DELETE	6.1 TITLE Director	William Reilly 1121 Crandon Blvd. Key Biscayne, FL 33149 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition

14. I hereby certify that the information supplied with this filing 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, with all other like empowered.

SIGNATURE: *Maxine S. Ellend* SIGNATURE REQUIRED DATE 4/9/99
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

001709

CR2E037 (1/198)