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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 726226

(4)

OCEAN TOWERS II OF VERO BEACH, INC.

Principal Place	of Business	Mailing Address				
2600-2824 CARDINAL DR PO BOX 3905		VERO BCH FL 32964				
				<ol> <li>Date Incorporated or Qualified 04/24/1973</li> </ol>	3a. Date of Last 02/22/1	
	ace of Business	2a. Mailing Address		4. FEI Number		Applied For
21	0	26		59-1582260		Not Applicable
Suite, Apt. :		Suite, Apt. #, etc.		5. Certificate of Status Desired		Additional Required
City & State		City & State		Election Campaign Financing     Trust Fund Contribution		May Be
Zip	Country	Zip	Country	8. This corporation has liability for inf	tangible tax under s.	199.032,
24	25	29	30		Yes 🗌 No	
	9. Name and Address of Curi	rent Hegistered Agent	81 Name	10. Name and Address of New Re	gistered Agent	
2824 CA VERO BI	Burchard M RDINAL DR CH FL 32963		82 Street Ac 83 84 City	ddress (P.O. Box Number is Not Acceptable	F1 85 Zir	) Code
or regiotors	oo agent, or both, in the state of the	002 and 617.1508, Florida Statute orida. Such change was authorizi ection 617.0503, Florida Statutes	BO DV THE COMPORATIONS D	poration submits this statement for the purpo pard of directors. I hereby accept the appoin	ose of changing its rentment as registered	egistered office agent. I am
SIGNATURE _			TF: Begistered Agent signature recy	ired when reinstalled	DATE:	
SIGNATURE _	Signature typed or printed name of registered ag		TE: Registered Agent signature reck		DATE	RS IN 12
SIGNATURE _	Signature typed or printed name of registered ag	gort and title if applicable (NO		ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECTO	
SIGNATURE _	Signature typed or printed name of registered as	port and title if applicable (NO AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICE V1		RS IN 12
SIGNATURE 12. TITLE NAME	Signature typed or printed name of registered ag OFFICERS A	port and title if applicable (NO AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICE V1 William Lord	ERS AND DIRECTO	
SIGNATURE	Signature typed or printed name of registered ag OFFICERS A VD WARD, LAURANCE	port and title if applicable (NO AND DIRECTORS	13. 1.1 TITLE <b>\(\forall\)</b> ? 1.2 NAME	ADDITIONS/CHANGES TO OFFICE V1	ERS AND DIRECTO	
SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature typed or printed name of registered ag OFFICERS A VD WARD, LAURANCE 2812 CARDINAL DR. VERO BCH, FL 000000 PD	port and title if applicable (NO AND DIRECTORS	13. 1.1 TITLE VIP 1.2 NAME 1.3 STREET ADDRESS	ADDITIONS/CHANGES TO OFFICE V1 William Lord	ERS AND DIRECTO	
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SIGNATURE:

4-4-96

Daytime Phone #