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Jun 03 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **730279** (7)
1. Corporation Name
EMBASSY CONDOMINIUM APARTMENTS ASSOCIATION, INC.



Principal Place of Business	Mailing Address
C/O LISA SAGEBIEL #105 1475 SE 15TH ST #105 FT. LAUDERDALE FL 33316	C/O LISA SAGEBIEL #105 1475 SE 15TH ST #105 FT. LAUDERDALE FL 33316

3. Date Incorporated or Qualified	07/24/1974
4. FEI Number	59-2262882
Applied For	<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired	<input type="checkbox"/> \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution	<input type="checkbox"/> \$5.00 May Be Added to Fees
7. Is this nonprofit corporation a homeowners association?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

2. Principal Place of Business	2a. Mailing Address
21 1475 S.E. 15th St.	28 same
22 Suite, Apt. #, etc. 207	27 Suite, Apt. #, etc.
23 City & State FT. LAUDERDALE FL.	26 City & State
24 Zip 33316	29 Zip
25 Country U.S.A.	30 Country

9. Name and Address of Current Registered Agent
SAGEBIEL, LISA
1475 SE 15TH ST #105
FT LAUDERDALE FL 33316

10. Name and Address of New Registered Agent

81 Name	GREGORY REWA
82 Street Address (P.O. Box Number is Not Acceptable)	1475 S.E. 15th St.
83	Apt. 207
84 City	FT. LAUDERDALE FL
85 Zip Code	33316

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 **5-10-98**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		<input type="checkbox"/> DELETE
TITLE	PD	
NAME	REWA, GREGORY	
STREET ADDRESS	1475 SE 15TH ST. #207	
CITY-ST-ZIP	FT. LAUDERDALE FL	
TITLE	D	
NAME	SAYLOR, LARRY	
STREET ADDRESS	1475 S.E. 15TH ST., #217	
CITY-ST-ZIP	FT. LAUDERDALE FL	
TITLE	SD	
NAME	PORTER, WILLIAM P	
STREET ADDRESS	1475 S.E. 15TH ST., #306	
CITY-ST-ZIP	FT LAUDERDALE, FL 00000	
TITLE	D	
NAME	CHRISTENSEN, JOHN	
STREET ADDRESS	1475 SE 15TH ST. #310	
CITY-ST-ZIP	FT. LAUDERDALE FL	
TITLE	D	
NAME	LEZARK, LOU	
STREET ADDRESS	1475 S.E. 15TH ST., #203	
CITY-ST-ZIP	FT. LAUDERDALE FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
1.1 TITLE			
1.2 NAME			
1.3 STREET ADDRESS			
1.4 CITY-ST-ZIP			
2.1 TITLE			
2.2 NAME			
2.3 STREET ADDRESS			
2.4 CITY-ST-ZIP			
3.1 TITLE			
3.2 NAME			
3.3 STREET ADDRESS			
3.4 CITY-ST-ZIP			
4.1 TITLE			
4.2 NAME			
4.3 STREET ADDRESS			
4.4 CITY-ST-ZIP			
5.1 TITLE			
5.2 NAME			
5.3 STREET ADDRESS			
5.4 CITY-ST-ZIP			
6.1 TITLE			
6.2 NAME			
6.3 STREET ADDRESS			
6.4 CITY-ST-ZIP			

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.

SIGNATURE: *[Signature]*

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