

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Northern
Secretary of State
DIVISION OF CORPORATIONS

**APPROVED
AND
FILED**

95 JUN 20 AM 9:23

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 753085
Corporation Name
THE TOWER AT PORT ROYALE
3200 PORT ROYALE DRIVE NORTH
FT. LAUDERDALE, FL 33308

Principal Place of Business Mailing Address
SAME AS ABOVE

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified **06-24-1980** 3a. Date of Last Report **05-01-1994**
4. FEI Number **59-2096190** Applied For Not Applicable

21. Principal Place of Business 2a. Mailing Address
22. Suite, Apt. #, etc. 27. Suite, Apt. #, etc.
23. City & State 28. City & State
24. Zip 25. Country 29. Zip 30. Country

5. Certificate of Status Desired **\$8.75 Additional Fee Required**
6. Election Campaign Financing Trust Fund Contribution **\$5.00 May Be Added to Fees**
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status **\$68.75 Supplemental Fee Not Required**
8. This corporation has liability for intangible tax under §. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent
BECKER & POLOAKOFF
EMERALD LAKE CORPORATE PARK
3111 STIRLING ROAD
PORT LAUDERDALE, FL 33312-6225

10. Name and Address of New Registered Agent
B1 Name
B2 Street Address (P.O. Box Number is Not Acceptable)
B3
B4 City **FL** B5 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1008, 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 607.0505, Florida Statutes.

SIGNATURE _____ Signature, typed or printed name of registered agent and the # applicable _____ (NOTE: Registered Agent signature required when re-registering) _____ DATE _____

12. OFFICERS AND DIRECTORS
TITLE NAME STREET ADDRESS CITY - ST - ZIP
P/D JOHN BODETTE 3200 PORT ROYALE DR. N. FT. LAUDERDALE, FL 33308
V/D RICHARD COPPOLA 3200 PORT ROYALE DR. N. FT. LAUDERDALE, FL 33308
S/D ROBERT TABOR 3200 PORT ROYALE DR. N. FT. LAUDERDALE, FL 33308
T/D DOROTHY BOYLE 3200 PORT ROYALE DR. N. FT. LAUDERDALE, FL 33308
D WALTER TURLEY 3200 port royale dr. n FT. LAUDERDALE, FL 33308
D MERTON JOHNSON 3200 PORT ROYALE DR. N FT. LAUDERDALE, FL 33308

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP
700001519857
-06/21/95--01100--012
***163.75 Change 168 Addition
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 do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), 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 applicable, or on an attachment with an address.

SIGNATURE: *Richard Coppola* U.P. June 1-95
SIGNATURE AND TYPED OR PRINTED NAME OF NOMINEE OFFICER OR DIRECTOR **RICHARD COPPOLA, VICE PRESIDENT/DIRECTOR** Daytime Phone #