

FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # 755993 (3)

1. Corporation Name
7 EAST CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business: 535 NE 7 AVENUE FT. LAUDERDALE FL 33301
Mailing Address: 535 NE 7 AVENUE FT. LAUDERDALE FL 33301

3. Date Incorporated or Qualified: 01/21/1981
3a. Date of Last Report: 02/08/1995
4. FEI Number: 59-2478232
5. Certificate of Status Desired: \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

2. Principal Place of Business: 21 *same*
2a. Mailing Address: 26
Suite, Apt. #, etc.: 22, 27
City & State: 23, 28
Zip: 24, 25 Country: 29, 30

9. Name and Address of Current Registered Agent
TIGHE, TOM
800 E BROWARD BLVD
STE 505
FT LAUDERDALE FL 33301

10. Name and Address of New Registered Agent
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: _____ (NOTE: Registered Agent signature required when reinstating) DATE: _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD SENKO, RICK 575 NE 7TH AVE FT LAUDERDALE, FL 00000	<input type="checkbox"/> DELETE	1.1 TITLE
NAME			1.2 NAME
STREET ADDRESS			1.3 STREET ADDRESS
CITY-ST-ZIP			1.4 CITY-ST-ZIP
TITLE	D ALEXANDER, STUART 543 NE 7TH AVE FT. LAUDERDALE FL	<input type="checkbox"/> DELETE	2.1 TITLE
NAME			2.2 NAME
STREET ADDRESS			2.3 STREET ADDRESS
CITY-ST-ZIP			2.4 CITY-ST-ZIP
TITLE	TD HANCOCK, ROB 559 NE 7TH AVE FT. LAUDERDALE FL	<input checked="" type="checkbox"/> DELETE	3.1 TITLE
NAME			3.2 NAME
STREET ADDRESS			3.3 STREET ADDRESS
CITY-ST-ZIP			3.4 CITY-ST-ZIP
TITLE	SD POSEY, DALE 559 NE 7TH AVE FT LAUDERDALE FL	<input checked="" type="checkbox"/> DELETE	4.1 TITLE
NAME			4.2 NAME
STREET ADDRESS			4.3 STREET ADDRESS
CITY-ST-ZIP			4.4 CITY-ST-ZIP
TITLE	D KING, DOUGLAS 571 NE 7TH AVE FT LAUDERDALE FL	<input type="checkbox"/> DELETE	5.1 TITLE
NAME			5.2 NAME
STREET ADDRESS			5.3 STREET ADDRESS
CITY-ST-ZIP			5.4 CITY-ST-ZIP
TITLE	D KING, HANZ 575 NE 7TH AVE FT LAUDERDALE FL	<input type="checkbox"/> DELETE	6.1 TITLE
NAME			6.2 NAME
STREET ADDRESS			6.3 STREET ADDRESS
CITY-ST-ZIP			6.4 CITY-ST-ZIP

Richard Senko
575 NE 7th Ave
FT Laud. FL

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 119.07(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 changed, or on an attachment with an address.

SIGNATURE: *Richard D. Senko Pres.* 1-25-96 467-3501

CR2E037 (12/95)