

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**CORPORATION
ANNUAL REPORT
1995**



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

FILED
95 JUL 10 AM 9:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # L35289 (2)

1. Corporation Name
TREETOP APARTMENTS REALTY CORP.

Principal Place of Business: 599 LEXINGTON AVE. 26 FL NEW YORK NY 10043
Mailing Address: UNITED CORPORATE SERVICES, INC. 801 NORTHEAST 167TH STREET, SUITE 300 NORTH MIAMI BEACH FL 33162

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 12/11/1989
3a. Date of Last Report: 05/01/1994
4. FEI Number: 22-3049162
5. Certificate of Status Desired: \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees
6. This corporation has liability for intangible tax under S. 199.032, Florida Statutes: Yes No

2. Principal Place of Business: 21, 22, 23, 24
2a. Mailing Address: 26, 27, 28, 29, 30

9. Name and Address of Current Registered Agent: UNITED CORPORATE SERVICES, INC. 801 N.E. 167TH ST. SUITE 300 NORTH MIAMI BEACH FL 33162
10. Name and Address of New Registered Agent: 81 Name, 82 Street Address, 83, 84 City, 85 Zip Code (FL)

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE: _____ (NOTE: Registered Agent signature required when reappointing) DATE: _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE: P	CAHILL, WILLIAM T. 599 LEXINGTON AVENUE NEW YORK NY 10043	1.1 TITLE: DP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: VS	MCCARTHY, JOSEPH 2502 ROCKY POINT ROAD TAMPA FL 33607	2.1 TITLE: VS	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: VAS	MORRA, PAUL E. 2502 ROCKY POINT ROAD TAMPA FL 33607	3.1 TITLE: VAS	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: VT	CALIA, VITO 850 THIRD AVE. NEW YORK NY 10043	4.1 TITLE: VT	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: VAT	LYNN, HOWARD 850 THIRD AVENUE NEW YORK NY	5.1 TITLE: VAT	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: D	GOLDSTEIN, PATRICIA 599 LEXINGTON AVENUE NEW YORK NY 10043	6.1 TITLE:	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: William T. Cahill 5/2/95 212-559-4850
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR (Date) (Telephone No.)
WILLIAM T. CAHILL