

FILE NOW: FILING FEE IS \$61.25

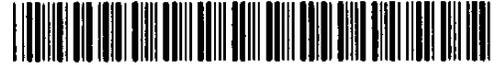
NONPROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # N95000005615 (8)

1. Corporation Name
CLEARVIEW TOWERS CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business: 2829 INDIAN CREEK DRIVE MIAMI BEACH FL 33140
Mailing Address: 2829 INDIAN CREEK DRIVE MIAMI BEACH FL 33140

3. Date Incorporated or Qualified: 11/28/1995
3a. Date of Last Report

2. Principal Place of Business (21-23) and Mailing Address (2a-2e) details including Suite, Apt. #, etc., City & State, Zip, and Country.

4. FEI Number (Applied For/Not Applicable)
5. Certificate of Status Desired (Checked)
6. Election Campaign Financing Trust Fund Contribution (Not Checked)
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes (Yes/No)

9. Name and Address of Current Registered Agent
**WOOD, RICHARD A
1111 LINCOLN ROAD MALL
SUITE 500
MIAMI BEACH FL 33139**

10. Name and Address of New Registered Agent (81-85) including Name, Street Address, City, and 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: [Signature] DATE: [Blank]

12. OFFICERS AND DIRECTORS (1-12) including Title, Name, Street Address, City-St-Zip, and Delete checkbox.

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (11-14) including Title, Name, Street Address, City-St-Zip, and Change/Addition checkboxes.

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 in an attachment with an address.

SIGNATURE: [Signature] DATE: 3-18-96

CR2E037 (12/95)

pm 3-25-1996