FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 MAR 29 AM 7:18

DOCUMENT # 710497 (9)

1. Corporation Name
LONDON TOWER CONDOMINIUM, INC.

Principal Place of Business	Mailing Address
9381 EAST BAY HARBOR DRIVE BAY HARBOR ISLAND FL 33154	9381 EAST BAY HARBOR DRIVE BAY HARBOR ISLAND FL 33154

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 03/10/1966
3a. Date of Last Report: 03/15/1994
4. FEI Number: 59-1144872 ☐ Applied For ☐ Not Applicable
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 S. 199.032, Florida Statutes ☐ Yes ☐ No

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

9. Name and Address of Current Registered Agent

RICHTER, MILTON
9381 E BAY HARBOR DR
BAY HARBOR ISL, FL
33154

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 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: [signature] DATE
Signature, Type or Printed Name of Registered Agent and Title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D	11 TITLE		☐ Change ☐ Addition
NAME	KRAUSE, PAUL	12 NAME		
STREET ADDRESS	9381 E. BAY HARBOR DR	13 STREET ADDRESS		
CITY-ST-ZIP	BAY HARBOR IS, FL 00000	14 CITY-ST-ZIP		
TITLE	D	21 TITLE		☐ Change ☐ Addition
NAME	ROISMAN, JORGE	22 NAME		
STREET ADDRESS	9381 E BAY HARBOR DR	23 STREET ADDRESS		
CITY-ST-ZIP	BAY HARBOR IS, FL 00000	24 CITY-ST-ZIP		
TITLE	Chairman of the Board D	31 TITLE	Chairman of the BoaRD D	☒ Change ☐ Addition
NAME	NEEDLE, GILBERT	32 NAME	Needle,Gilbert	
STREET ADDRESS	9381 E BAY HARBOR DR	33 STREET ADDRESS	9381 E.Bay Harbor Dr.	
CITY-ST-ZIP	BAY HARBOR IS, FL 00000	34 CITY-ST-ZIP	Bay Harbor Is.Fla.33154	
TITLE		41 TITLE	Director	☐ Change ☒ Addition
NAME	Robert Manzanares D	42 NAME	Robert Manzanares	
STREET ADDRESS	9381 E. Bay Harbor Dr.	43 STREET ADDRESS	9381 E. Bay Harbor Dr.	
CITY-ST-ZIP	Bay Harbor Isl. Fl. 33154	44 CITY-ST-ZIP	Bay Harbor Island, Fl. 33154	
TITLE	Treasurer	51 TITLE	D	☐ Change ☒ Addition
NAME	Libby Goldberg D	52 NAME	Louise Libby Goldberg	
STREET ADDRESS	9381 E. Bay Harbor Dr.	53 STREET ADDRESS	9381 E. Bay Harbor Dr.	
CITY-ST-ZIP	Bay Harbor Isl. Fl. 33154	54 CITY-ST-ZIP	Bay Harbor Isl. Fl. 33154	
TITLE	Secretary	61 TITLE	D	☐ Change ☒ Addition
NAME	Vincent Coughlin	62 NAME	Vincent Coughlin	
STREET ADDRESS	9381 E. Bay Harbor Isl.	63 STREET ADDRESS	9381 E. Bay Harbor Dr.	
CITY-ST-ZIP		64 CITY-ST-ZIP	Bay Harbor Isl. Fl. 33154	

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: GILBERT NEEDLE Gilbert Needle V.P. 3-2-95
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #