## FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT # 708270

(4)

INTRACOASTAL TERRACE CONDOMINIUM CORPORATION, IN C.



Principal Place of Business 711 N E HARBOUR TERRACE BOCA RATON FL 33431		Mailing Address  * BEACON PROPERTY MANAGEMENT  1 NORTH OCEAN BOULEVARD #7  BOCA RATON FL 33432  US				
				3. Date Incorporated or Qualified 12/18/1964	3a. Date of Last Report 04/26/1995	
2. Principal Place of Business		2a. Mailing Address		4. FEI Number	Applied For	
21		26 500 E. Spanish River Blyd		81 vd. 56-0885509	Not Applicable	
Suite, Apt #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional	
22		27 #18		5. Certificate of Status Desired	Fee Required	
Crty & State		City & State		6. Election Campaign Financing	\$5.00 May Be	
23		Boca Raton, FL.		Trust Fund Contribution	Added to Fees	
Zφ	Country	Zip Zip	Country	8. This corporation has liability for i		
24	25	29 33431	30		] Yes □ No	
	9. Name and Address of Current	Registered Agent	81 Name	10. Name and Address of New R	egistered Agent	
BEACON PROPERTY MANAGEMENT  1 NORTH OCEAN BOULEVARD #7  BOCA RATON FL 33432  BY City boca Raton FL 85 Zip Code 3						
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. Thereby accept the appointment as registered agent. I am familiar with, and proceed the obligations of, Section 617.0503, Florida Statutes.  SIGNATURE  Signature, State or purishing a of registered agent and tide if agent are:  [Invite: High-fixed Agent a						
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFF	ICERS AND DIRECTORS IN 12	
TILE	<b>D</b>	DEFELE	1 1 THILE	D.	Change X Addition	
NAME	TUNIS, GEORGE		1.2 NAME	ļ · ·		
STREET ADDRESS	711 NE HARBOUR TERRACE		1.3 STREET ADDRESS	Dorothy Williams	06 B B	
CITY-ST-ZIP	BOCA RATON FL	<b></b>	1 4 CITY - ST - ZIP	711 NE Harbour Terr.#3		
TITLE	VB	(NO ELETE	2 1 TITLE	D.	☐ Change ☐ Addition	
NAME	GEPFORD, MARTHA		2.2 NAME	Walter Frank		
STHEET ADDRESS	711 NE HARBOUR TERRACE		2.3 STREET ADDRESS	711 NE Harbour TErr.#	407 Book PAton Fi	
CITY-ST-ZIP	BOCA RATON FL		2 4 CITY ST-ZIP		407, BOCA RATOR, FL.	
TITLE	D	DELETE	3.1 TITLE	V.D.	Change Addition	
NAME ]	WAGSTAFF, CATHERINE A		3.2 NAME			
STREET ADDRESS	711 N E HARBOUR TERRACE		3.3 STREET ADDRESS			
CITY-ST-ZIP	BOCA RATON, FL 00000		3.4 CITY ST. ZIP			
TITLE		DELETE	4 1 TITLE	D.	☐ Change ☐ Addition	
NAME	DIETRICH, WALLIE		4 2 NAME	Robert Cummings	Α	
STREET ADDRESS	711 NE HARBOUR TERRACE		4.3 STREET ADDRESS		00 5 54	
CITY - ST - ZIP	BOCA RATON FL		4.4 CITY - ST- ZIP	711 NE Harbour Terr.#3	UZ, Boca RAton, FL.	
TITLE	P.D.	DELFTE	5 1 THILF	D.	Change Addition	
NAME	MOLONY, MICHAEL	<del></del>	5.2 NAME			
STREET ADDRESS	711 N E HARBOUR TERRACE		5 3 STREET ADDRESS			
CITY - ST - ZIP	BOCA RATON, FL 00000		5 4 CITY-ST-ZIP			
TIFLE	STD	DELETE	61 TITLE		Change Addition	
NAME	PHILLIPS, HOWARD		6 2 NAME			
1 1	·		6 3 STREET ADORESS			
STREET ADDRESS	711 NE HARBOUR TERRACE					
CFTY-ST-ZIP	BOCA RATON FL v certify that the information supplied w	ith this filing is voluntably form	shed and does not qua	alfy for the exemption stated in Section 119	.07(3)(k), Florida Statutes. I further	

4. I do hereby certify that the information supplied with this filling is voluntarily turnished and does not quality for the exemption stated in Section 119.07(3)(8), Florida Statutes, Further certify that the information indicated of this annual report or supplimental 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 comporation or the receiver or trust elempowered to execute this report as required by Chapter 617, Florida Statutes, and that my name appears in Block 12 or Block.

SIGNATURE

PATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytme Phone #