

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

FILED
Apr 22, 1996 08:00 AM
Secretary of State

DOCUMENT # 712224 (5)

1. Corporation Name
1475 TERRA TOWERS CONDOMINIUM, INC.



Principal Place of Business Mailing Address
1475 N.E. 125TH TERR. NO. MIAMI FL 33161

3. Date Incorporated or Qualified **02/08/1967** 3a. Date of Last Report **04/18/1995**
4. FEI Number **59-1159693** 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**
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 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.
22 City & State 27 City & State
23 Zip 25 Country 29 Zip 30 Country

9. Name and Address of Current Registered Agent
**EVANOFF, CATHRYN
1475 NE 125TH TERRACE
APARTMENT 605
NORTH MIAMI FL 33161**

10. Name and Address of New Registered Agent
81 Name **Ludwig, LEONARD PRES.**
82 Street Address (P.O. Box Number is Not Acceptable) **1475 N.E. 125TH TERRACE**
83 **Apt. 607**
84 City **North Miami FL** 85 Zip Code **33161**

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]* 4-15-96 DATE

12. OFFICERS AND DIRECTORS		
TITLE	D	<input type="checkbox"/> DELETE
NAME	SAVARD, JOHN	
STREET ADDRESS	1475 NE 125 TERR 112	
CITY-ST-ZIP	NO MIAMI FL 33161	
TITLE	SD	<input type="checkbox"/> DELETE
NAME	KRUGMAN, BETTY	
STREET ADDRESS	1475 NE 125TH TERR.	
CITY-ST-ZIP	N. MIAMI FL 33161	
TITLE	D	<input type="checkbox"/> DELETE
NAME	BODNER, MARY	
STREET ADDRESS	1475 NE 125 TERR 114	
CITY-ST-ZIP	NO MIAMI FL 33161	
TITLE	VTD	<input checked="" type="checkbox"/> DELETE
NAME	SANDLIN, DAN	
STREET ADDRESS	1475 NE 125TH TERR.	
CITY-ST-ZIP	N. MIAMI FL	
TITLE	VD	<input checked="" type="checkbox"/> DELETE
NAME	ZDAN, JEAN	
STREET ADDRESS	1475 NE 125TH TERR.	
CITY-ST-ZIP	N. MIAMI FL	
TITLE	PD	<input checked="" type="checkbox"/> DELETE
NAME	EVANOFF, CATHRYN	
STREET ADDRESS	1475 N.E. 125 TERRACE - #605	
CITY-ST-ZIP	NO. MIAMI FL 33161	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
1.1 TITLE	PD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	Ludwig, LEONARD	
1.3 STREET ADDRESS	1475 NE 125TH TERRACE # 607	
1.4 CITY-ST-ZIP	NO. MIAMI FL 33161	
2.1 TITLE	VD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	BROWN, Richard	
2.3 STREET ADDRESS	1475 NE 125TH TERRACE	
2.4 CITY-ST-ZIP	NO. MIAMI FL 33161	
3.1 TITLE	SD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	EDGREN, SALLY	
3.3 STREET ADDRESS	1475 NE 125 TERRACE	
3.4 CITY-ST-ZIP	NO. MIAMI FL 33161	
4.1 TITLE	TD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	KRUGMAN, BETTY	
4.3 STREET ADDRESS	1475 NE 125TH TERRACE	
4.4 CITY-ST-ZIP	NO MIAMI FL 33161	
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

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: *[Signature]* 4-15-96 892-0588 DATE Daytime Phone #

CR2E037 (12/95)