

FILE NOW: FILING FEE IS \$61.25

FILED  
Apr 27 1998 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N02572** (8)

1. Corporation Name

**CORAL SPRINGS TOWER CLUB II CONDOMINIUM ASSOCIATION, INC.**



Principal Place of Business <b>7932 WILES RD CORAL SPRINGS FL 33067 US</b>		Mailing Address <b>7932 WILES ROAD CORAL SPRINGS FL 33067</b>		3. Date Incorporated or Qualified <b>04/16/1984</b>	
				4. FEI Number <b>59-2440715</b>	
2. Principal Place of Business		2a. Mailing Address		5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
21 Suite, Apt. #, etc.		26 Suite, Apt. #, etc.		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	
22 City & State		27 City & State		7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input type="checkbox"/> No	
23 Zip		28 Zip		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	
24 Country		29 Country		30	
9. Name and Address of Current Registered Agent <b>KAYE &amp; ROGER, P.A. 6261 N.W. 6TH WAY., #103 SUITE 207 FT. LAUDERDALE FL 33309</b>				10. Name and Address of New Registered Agent	
				81 Name	
				82 Street Address (P.O. Box Number is Not Acceptable)	
				83	
				84 City	
				85 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, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	P	<input type="checkbox"/> DELETE		1.1 TITLE	P/T	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	SEIER-SWIEZY, LYDIA			1.2 NAME	Geraldine Greenberg		
STREET ADDRESS	8800 N.W. 30TH ST., #44			1.3 STREET ADDRESS	3801 Environ Blvd. #319		
CITY-ST-ZIP	CORAL SPRINGS FL			1.4 CITY-ST-ZIP	Lauderhill, FL 33319		
TITLE	V	<input type="checkbox"/> DELETE		2.1 TITLE	V	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME	GREENBERG, GERALDINE			2.2 NAME	Rick Goodis		
STREET ADDRESS	3801 ENVIRON BLVD., #319			2.3 STREET ADDRESS	20423 State Rd. #7 #6131		
CITY-ST-ZIP	LAUDERHILL FL			2.4 CITY-ST-ZIP	Boca Raton, FL 33498		
TITLE	S	<input checked="" type="checkbox"/> DELETE		3.1 TITLE	S/D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME	HOFFER, MARTIN			3.2 NAME	Jeffrey Greenberg		
STREET ADDRESS	2701 RIVERSIDE DRIVE., #B-304			3.3 STREET ADDRESS	5417 N. W. 83rd Way		
CITY-ST-ZIP	CORAL SPRINGS FL			3.4 CITY-ST-ZIP	Coral Springs, FL 33065		
TITLE	TD	<input checked="" type="checkbox"/> DELETE		4.1 TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	HOLDEN, NANCY			4.2 NAME	Lydia Seier-Swiezy		
STREET ADDRESS	2259 N.W. 65TH AVE.			4.3 STREET ADDRESS	8800 N. W. 30th St. #44		
CITY-ST-ZIP	MARGATE FL			4.4 CITY-ST-ZIP	Coral Springs, FL 33065		
TITLE	D	<input checked="" type="checkbox"/> DELETE		5.1 TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME	HOFFER, MARTIN			5.2 NAME	Walter Broadbent		
STREET ADDRESS	2701 RIVERSIDE DR #B304			5.3 STREET ADDRESS	2701 Riverside Drive		
CITY-ST-ZIP	CORAL SPRINGS FL			5.4 CITY-ST-ZIP	Coral Springs, FL 33065		
TITLE	D	<input type="checkbox"/> DELETE		6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	HARTLEY, LYNN			6.2 NAME			
STREET ADDRESS	4040 GALT OCEAN DRIVE., #318			6.3 STREET ADDRESS			
CITY-ST-ZIP	FT. LAUDERDALE FL			6.4 CITY-ST-ZIP			

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:

*Lydia Seier-Swiezy*

4-20-98

954-344-5353

CR2E037 (10/97)