FILED

Secretary of State

02-24-2003 90171 020 ****61.25

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 710497

1. Entity Name

LONDON TOWER CONDOMINIUM, II	NU	j.
------------------------------	----	----

Principal Place of Business Mailing Address 9381 EAST BAY HARBOR DRIVE 9381 EAST BAY HARBOR DRIVE BAY HARBOR ISLAND FL 33154 BAY HARBOR ISLAND FL 33154 2. Principal Place of Business 3. Mailing Address Suite, Apt. # etc. Suite, Apt. #, etc CHECK HERE IF MAKING CHANGES City & State City & State 4. FEI Number 59-1144872 Applied For Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name GOLDBERG, LOUISE L= ___ Street Address (P.O. Box Number is Not Acceptable) 9381 E BAY HARBOR DRIVE BAY HARBOR ISLAND FL 33154 Zip Code 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing FILE NOW: FEE IS \$61,25 \$5.00 May Be Make Check Payable to Trust Fund Contribution. Added to Fees Florida Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 PD TITLE ☐ Delete TITLE ☐ Addition NEEDLE, GILBERT NAME NAME STREET ADDRESS 9381 E BAY HARBOR DRIVE STREET ADDRESS CITY-ST-ZIP **BAY HARBOR ISLAND FL 33154** CITY-ST-ZIP VΡ TITLE ☐ Delete TITLE ☐ Change ☐ Addition LANSKY, TOMAS NAME NAME STREET ADDRESS 9381 E BAY HARBOR DR STREET ADDRESS CITY-ST-ZIP **BAY HARBOR ISL FL 33154** CITY-ST-ZIP TITLE Delete Change Change Addition Diga Laura 9381 E Bay Harbor Dr SNIDER, KATHY - 1 NAME NAME STREET ADDRESS 9381 E BAY HARBOR DRIVE STREET ADDRESS CITY-ST-ZIP **BAY HARBOR ISLAND FL 33154** Bay Harbor Isl CITY-ST-ZIP 33154 TITLE ☐ Delete TITLE ☐ Change ☐ Addition ZIPKIN. BERNICE NAME NAME STREET ADDRESS 9381 E BAY HARBOR DR STREET ADDRESS CITY-ST-ZIP BAY HARBOR IS. FL 33154 CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME GOLDBERG, LOUISE L NAME STREET ADDRESS 9381 E. BAY HARBOR DR. STREET ADDRESS CITY-ST-ZIP BAY HARBOR IS. FL 33154 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

12. 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 report or supplemental 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 10 or Block 11 if of the corporation or the receiver or trustee empowered to execute this report as required by changed, or on an attachment with an address, with all other like empowered. Cilbert Needle

2 20/03

305-865-2242