

FILE NOW: FILING FEE IS \$61.25.

99 FEB 12 PM 2:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

NONPROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # 706397			
1. Corporation Name TOWN COLONY CONDOMINIUM CORPORATION, INC.			
Principal Place of Business C/O BRUCE D. DICKSON 2916 FUNSTON ST. APT 47 HOLLYWOOD FL 33020		Mailing Address C/O BRUCE D. DICKSON 2916 FUNSTON ST. APT 47 HOLLYWOOD FL 33020	



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21 Suite, Apt. #, etc.		24 Suite, Apt. #, etc.		11/08/1963	
22 City & State		27 City & State		4. FEI Number	
23 Zip		28 Zip		59-1708878	
24 Country		30 Country		Applied For	
				Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>				\$5.00 May Be Added to Fees	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
DICKSON, BRUCE D. 2916 FUNSTON ST. APT 47 HOLLYWOOD FL 33020				61 Name 62 Street Address (P.O. Box Number is Not Acceptable) 63 64 City FL 65 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: Bruce D. Dickson - B. DICKSON - PRESIDENT DATE: 1/18/99

(NOTE: Registered agent signature required when registering)

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	D	<input type="checkbox"/> DELETE		1.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	CLEWIS, GAYLE			1.2 NAME			
STREET ADDRESS	2918 FUNSTON ST			1.3 STREET ADDRESS			
CITY-ST-ZIP	HOLLYWOOD FL 33020			1.4 CITY-ST-ZIP			
TITLE	D	<input type="checkbox"/> DELETE		2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	PLOCK, GLEN			2.2 NAME			
STREET ADDRESS	2918 FUNSTON STREET			2.3 STREET ADDRESS			
CITY-ST-ZIP	HOLLYWOOD, FL 00000			2.4 CITY-ST-ZIP			
TITLE	PD	<input type="checkbox"/> DELETE		3.1 TITLE		<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME	DICKSON, BRUCE D.			3.2 NAME	PD BRUCE D. DICKSON		
STREET ADDRESS	2916 FUNSTON ST.			3.3 STREET ADDRESS	2916 FUNSTON ST.		
CITY-ST-ZIP	HOLLYWOOD, FL 00000			3.4 CITY-ST-ZIP	Hollywood Fla. 33020		
TITLE	D	<input type="checkbox"/> DELETE		4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	AUERBACK, MARY			4.2 NAME			
STREET ADDRESS	2916 FUNSTON ST			4.3 STREET ADDRESS			
CITY-ST-ZIP	HOLLYWOOD FL 33020			4.4 CITY-ST-ZIP			
TITLE	D	<input type="checkbox"/> DELETE		5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	ANELLO, JUNE			5.2 NAME			
STREET ADDRESS	2915 PLUNKETT ST.			5.3 STREET ADDRESS			
CITY-ST-ZIP	HOLLYWOOD FL			5.4 CITY-ST-ZIP			
TITLE	D	<input type="checkbox"/> DELETE		6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	MESSINA, MARIE			6.2 NAME			
STREET ADDRESS	2916 FUNSTON ST #39			6.3 STREET ADDRESS			
CITY-ST-ZIP	HOLLYWOOD 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)(l), 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, with all other like empowered.

SIGNATURE: Bruce D. Dickson - B. DICKSON - PRESIDENT - 1/18/99 954-920-7265
Bruce D. Dickson - B. DICKSON - PRESIDENT 8/2/99 954-920-7265

CR2E037 (1/99)