

FILE NOW: FILING FEE IS \$61.25

FILED

Feb 12 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
--	---	---

DOCUMENT # **712224** (5)

1475 TERRA TOWERS CONDOMINIUM, INC.



Principal Place of Business <b>1475 N.E. 125TH TERR. NO. MIAMI FL 33161</b>	Mailing Address <b>1475 N.E. 125TH TERR. NO. MIAMI FL 33161</b>
--	--

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country
---	--

3. Date Incorporated or Qualified <b>02/08/1967</b>	4. FEI Number <b>59-1159693</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	7. Is this nonprofit corporation a homeowners association? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		

9. Name and Address of Current Registered Agent <b>MCKEE, WAYNE 1475 N.E. 125TH TERR, APT. 504 TERRA TOWERS CONDOMINIUM INC NORTH MIAMI FL 33161</b>
---

10. Name and Address of New Registered Agent 81 Name <b>EDMOND JOHNSON</b> 82 Street Address (P.O. Box Number is Not Acceptable) <b>1475 N.E. 125TH TERR.</b> 83 <b>UNIT 312</b> 84 City <b>NO. MIAMI</b> FL 85 Zip Code <b>33161</b>
--

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 *X Edmond O. Johnson* (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE <b>VPD</b>	<input checked="" type="checkbox"/> DELETE	1.1 TITLE <b>PD</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME <b>BROOKS, WAYNE</b>		1.2 NAME <b>JOHNSON, EDMOND</b>	
STREET ADDRESS <b>1475 N.E. 125TH TERR., APT. 208</b>		1.3 STREET ADDRESS <b>1475 N.E. 125TH TERR. #312</b>	
CITY-ST-ZIP <b>NO MIAMI FL</b>		1.4 CITY-ST-ZIP <b>NO. MIAMI FL 33161</b>	
TITLE <b>VPD</b>	<input type="checkbox"/> DELETE	2.1 TITLE <b>VPD</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME <b>BISIANA, SOFIA</b>		2.2 NAME <b>EVANOFF, CATHERINE</b>	
STREET ADDRESS <b>1475 N.E. 125TH TERR., APT. 606</b>		2.3 STREET ADDRESS <b>1475 N.E. 125TH TERR. #605</b>	
CITY-ST-ZIP <b>N. MIAMI FL</b>		2.4 CITY-ST-ZIP <b>N. MIAMI FL 33161</b>	
TITLE <b>SD</b>	<input type="checkbox"/> DELETE	3.1 TITLE <b>SD</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME <b>EDGREN, SALLY</b>		3.2 NAME <b>BUTLER, MATT</b>	
STREET ADDRESS <b>1475 N.E. 125TH TERR., APT. 209</b>		3.3 STREET ADDRESS <b>1475 N.E. 125TH TERR. #311</b>	
CITY-ST-ZIP <b>NO MIAMI FL</b>		3.4 CITY-ST-ZIP <b>N. MIAMI FL 33161</b>	
TITLE <b>AS</b>	<input type="checkbox"/> DELETE	4.1 TITLE <b>TD</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME <b>EVANOF, CATHERINE</b>		4.2 NAME <b>KRUGHMAN, BETTY</b>	
STREET ADDRESS <b>1475 N.E. 125TH TERR., APT. 605</b>		4.3 STREET ADDRESS <b>1475 N.E. 125TH TERR. #105</b>	
CITY-ST-ZIP <b>N. MIAMI FL</b>		4.4 CITY-ST-ZIP <b>N. MIAMI FL 33161</b>	
TITLE <b>TD</b>	<input type="checkbox"/> DELETE	5.1 TITLE <b>D</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME <b>KRUGHMAN, BETTY</b>		5.2 NAME <b>BESIANA, SOFIA</b>	
STREET ADDRESS <b>1475 N.E. 125TH TERR., APT. 105</b>		5.3 STREET ADDRESS <b>1475 N.E. 125TH TERR. #606</b>	
CITY-ST-ZIP <b>N. MIAMI FL</b>		5.4 CITY-ST-ZIP <b>N. MIAMI FL 33161</b>	
TITLE <b>PD</b>	<input checked="" type="checkbox"/> DELETE	6.1 TITLE <b>D</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME <b>MCKEE, WAYNE</b>		6.2 NAME <b>WILLIAMS, RAYMOND</b>	
STREET ADDRESS <b>1475 N.E. 125TH TERR., APT. 504</b>		6.3 STREET ADDRESS <b>1475 N.E. 125TH TERR. #304</b>	
CITY-ST-ZIP <b>NO. MIAMI FL</b>		6.4 CITY-ST-ZIP <b>N. MIAMI FL 33161</b>	

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.

SIGNATURE: *X Edmond O. Johnson*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone # 0011743

CR2E037 (10/97)