

FILE NOW: FILING FEE IS \$61.25

2-2

NONPROFIT CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **718995** (4)

1. Corporation Name

EMERALD TOWER ASSOCIATION, INC.

Ruth Gold



Principal Place of Business: **1401 SOUTH OCEAN BLVD
POMPANO BEACH FL 33062**

Mailing Address: **1401 SOUTH OCEAN BLVD
POMPANO BEACH FL 33062**

3. Date incorporated or Qualified: **08/12/1970**

3a. Date of Last Report: **01/24/1995**

2. Principal Place of Business: **21**

2a. Mailing Address: **26**

4. FEI Number: **59-1419717**

Applied For: Not Applicable

Suite, Apt. #, etc.: **22**

Suite, Apt. #, etc.: **27**

5. Certificate of Status Desired: **\$8.75 Additional Fee Required**

City & State: **23**

City & State: **28**

6. Election Campaign Financing Trust Fund Contribution: **\$5.00 May Be Added to Fees**

Zip: **24** Country: **25**

Zip: **29** Country: **30**

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**RUMIN, EDWARD
2500 NORTH FEDERAL HWY. # 201
FT. LAUDERDALE FL 33310-6057**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City **FL** 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: _____ (NOTE: Registered Agent signature to parcel when reinstating) DATE: _____

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	P	<input checked="" type="checkbox"/> DELETE	1.1 TITLE	P	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	PANKRATZ, HERBERT		1.2 NAME	GOLD, RUTH			
STREET ADDRESS	1401 S OCEAN BLVD.		1.3 STREET ADDRESS	1401 S OCEAN BLVD.			
CITY-ST-ZIP	POMPANO BEACH FL		1.4 CITY-ST-ZIP	POMPANO BEACH, FL	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE	VP	<input checked="" type="checkbox"/> DELETE	2.1 TITLE	VP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	BEMENT, RICHARD		2.2 NAME	ALFIERI, IRENE			
STREET ADDRESS	1401 S OCEAN BLVD.		2.3 STREET ADDRESS	1401 S OCEAN BLVD.			
CITY-ST-ZIP	POMPANO BEACH FL		2.4 CITY-ST-ZIP	POMPANO BEACH, FL	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE	S	<input checked="" type="checkbox"/> DELETE	3.1 TITLE	S	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	FEIGENBAUM, IRWIN		3.2 NAME	ALFIERI, IRENE			
STREET ADDRESS	1401 S OCEAN BLVD.		3.3 STREET ADDRESS	1401 S OCEAN BLVD.			
CITY-ST-ZIP	POMPANO BEACH FL		3.4 CITY-ST-ZIP	POMPANO BEACH, FL	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE	T	<input checked="" type="checkbox"/> DELETE	4.1 TITLE	T	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	PANKRATZ, HERBERT		4.2 NAME	MAITLAND, MARGOT			
STREET ADDRESS	1401 S. OCEAN BLVD.		4.3 STREET ADDRESS	1401 S OCEAN BLVD.			
CITY-ST-ZIP	POMPANO BEACH FL		4.4 CITY-ST-ZIP	POMPANO BEACH, FL	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE	D	<input checked="" type="checkbox"/> DELETE	5.1 TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	MOODY, SANDRA		5.2 NAME	CLAY, SHERMAN			
STREET ADDRESS	1401 S. OCEAN BLVD.		5.3 STREET ADDRESS	1401 S OCEAN BLVD.			
CITY-ST-ZIP	POMPANO BEACH FL		5.4 CITY-ST-ZIP	POMPANO BEACH, FL	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE	D	<input checked="" type="checkbox"/> DELETE	6.1 TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	MIELE, MICHAEL		6.2 NAME	MIELE, MICHAEL			
STREET ADDRESS	1401 S. OCEAN BLVD.		6.3 STREET ADDRESS	1401 S OCEAN BLVD.			
CITY-ST-ZIP	POMPANO BEACH FL		6.4 CITY-ST-ZIP	POMPANO BEACH, FL			

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: *Ruth Gold* **Ruth Gold** 3-13-96 954-781-7515

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (12/95)

718995

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SLOANE, GERNI
140 S OCEAN BLVD.
POMPANO BEACH, FLA

D
FISHER, BETH
1401 S OCEAN BLVD.
POMPANO BEACH, FLA