

FILE NOW: FILING FEE IS \$61.25

FILED

Apr 25 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997



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

DOCUMENT # 724859 (4)
1. Corporation Name
GOLDEN TERRACE CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business Mailing Address
13685 N. E. 10TH AVE N. MIAMI FL 33161
13685 N. E. 10TH AVE N. MIAMI FL 33161-3926

3. Date Incorporated or Qualified 11/22/1972
3a. Date of Last Report 02/07/1996

2. Principal Place of Business 2a. Mailing Address

21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.

22 City & State 27 City & State

23 Zip Country 28 Zip Country

24 25 29 30

4. FEI Number 59-1864727 Applied For Not Applicable

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

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

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

STEINHARDT, RAPHAEL, ESQ.
SCHWARTZ, KLEIN & STEINHARDT, P.A.
2750 N.E. 187TH ST.
N. MIAMI BEACH FL 33180

Please DELETE

81 Name ROBERT CURRY
82 Street Address (P.O. Box Number is Not Acceptable) 13685 NE 10th Ave #209
83
84 City NORTH MIAMI FL 85 Zip Code 33161

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 ROBERT CURRY Signature, typed or printed name of registered agent and state if applicable. (NOTE: Registered Agent signature required when retinaling) GATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN

TITLE D CANIS, RICHARD
NAME
STREET ADDRESS 13688 NE 10TH AVE
CITY-ST-ZIP N. MIAMI FL

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

TITLE D GUILLEN, RONALD
NAME
STREET ADDRESS 13685 NE LANE AVE
CITY-ST-ZIP N. MIAMI FL

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE TS SEYMOUR, FRIEDMAN
NAME
STREET ADDRESS 13685 NE 10 AVE
CITY-ST-ZIP MIAMI FL

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE PD CURRY, ROBERT
NAME
STREET ADDRESS 13685 NE 10TH AVE
CITY-ST-ZIP MIAMI FL

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE D GUILLEN, ERIC
NAME
STREET ADDRESS 13655 NE 10TH AVE
CITY-ST-ZIP MIAMI FL

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

200002156482
-04/28/97--01034--055
***61.25

14. I do 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 attached list of directors.

SIGNATURE: Seymour Friedman

(305) 693-4680
Laytime Phone # 0031777

CR2E037 (9/96)