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NONPROFIT CORPORATION ANNUAL REPORT



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

1996

SIGNATURE:

728144

(7)

DOCUMENT #

1. Corporation Name BAY PARK TOWERS CONDOMINIUM ASSOCIATION, INC.

FILED Feb 06 1996 8:00 am **Secretary of State**

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·	SS	Mailing Address					
3301 N.E. 5TH AVENUE		3301 N.E. STH AVENUE					
MIAMI FL 33137		MIAMI FL 33137				12 5	B
					3. Date Incorporated or Qualified 11/21/1973	3a. Date of Last 01/27/1	
. Principal Place of Bus	iness	2a. Mailing Address			4. FEI Number 59-1603811		Applied For
		26			59-1003011		Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired	k#	5 Additional Required
City & State		City & State			6. Election Campaign Financing	T T T T T T T T T T T T T T T T T T T	May Be
710	Country	Zip	Country		Trust Fund Contribution 8. This corporation has liability for i	Aude	to Fees 199.032.
Zip	25	29	30			Yes No	. 100.0021
9, N at	ne and Address of Current	Registered Agent			10. Name and Address of New R	egistered Agent	
			81	Name			
LERNER, LISA			82	Street Ac	idress (P.O. Box Number is Not Acceptab	le)	
	CIRCLE, SUITE 1102						
CORAL GABLES	FL 33134		83				
			84	City		FL 85 Z	ip Code
	10 8 017 0100	C17 1500 Florido Statuto	a the about	namad sav	poration submits this statement for the pur		registered of
 or registered agent. 	or both, in the State of Florid	a. Such change was authorized in 617.0503, Florida Statutes.	ea by the corp	oration's b	pard of directors. I hereby accept the appoint	bintment as registere	d agent. I am
GNATURE							
Signature, ty	ood or printed name of registered agent a			nt signature req	uired when reinstaling)	DATE	ORS IN 12
- T	OFFICENS AND	DIRECTORS	13.	Т.	ADDITIONS/CHANGES TO OFF		
P VINO		DELETE	1.1 TITLE	<u> </u>	ADDITIONS/CHANGES TO OFF	Change	
LE P KING	, EDWIN V		1.1 TITLE 1.2 NAME	T ADDRECC	ADDITIONS/CHANGES 10 OFF		
ME KING. REET ADDRESS 3301	, EDWIN V NE 5TH AVE, #1210		1.1 TITLE 1.2 NAME 1.3 STREE	T ADDRESS	ADDITIONS/CHANGES 10 OFF		
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SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR