

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # 729994 (4)
1. Corporation Name

TIGERTAIL BAY CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business

111 FONTAINEBLEAU BLVD
CORAL GABLES FL 33172

Mailing Address

111 FONTAINEBLEAU BLVD
CORAL GABLES FL 33172

3. Date Incorporated or Qualified
06/07/1974

3a. Date of Last Report
02/28/1995

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

4. FEI Number
59-1546097

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

SKRLD, INC
201 ALHAMBRA CIR
STE 1102
CORAL GABLES FL 33134

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

Signature, typed or printed name of registered agent and date if applicable

(NOTE: Registered Agent signature required when re-registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD ☐ DELETE

NAME DUTTON, DONN
STREET ADDRESS 2715 TIGERTAIL AVE., #504
CITY - ST - ZIP MIAMI FL

TITLE D ☐ DELETE

NAME CARROL, DICK
STREET ADDRESS 2715 TIGERTAIL AVE., #508
CITY - ST - ZIP MIAMI FL

TITLE ~~ST~~ ☐ DELETE

NAME LIGERMAN, DAVID
STREET ADDRESS 2715 TIGERTAIL AVE. #407
CITY - ST - ZIP MIAMI FL

TITLE DVP ☐ DELETE

NAME COOKS, IVORY
STREET ADDRESS 2715 TIGERTAIL AVE., #603
CITY - ST - ZIP MIAMI FL

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE

12 NAME

13 STREET ADDRESS

14 CITY - ST - ZIP

21 TITLE

22 NAME

23 STREET ADDRESS

24 CITY - ST - ZIP

31 TITLE

32 NAME

33 STREET ADDRESS

34 CITY - ST - ZIP

41 TITLE

42 NAME

43 STREET ADDRESS

44 CITY - ST - ZIP

51 TITLE

52 NAME

53 STREET ADDRESS

54 CITY - ST - ZIP

61 TITLE

62 NAME

63 STREET ADDRESS

64 CITY - ST - ZIP

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/4/96

305

5522
576-4400
Daytime Phone #

CR2E037 (12/95)