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Apr 21, 1999 8:00 am
Secretary of State

04-21-1999 90186 028 ****61.25

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NONPROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 730810

1. Corporation Name
2100 TOWERS CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business 2100 NORTH ATLANTIC AVENUE COCOA BEACH FL 32931	Mailing Address 2100 NORTH ATLANTIC AVENUE COCOA BEACH FL 32931
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2. Principal Place of Business 21 Suite, Apt. #, etc. 23 City & State 24 Zip 25 Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country	3. Date Incorporated or Qualified 09/27/1974	4. FEI Number 59-1583525	Applied For Not Applicable
		5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required	
		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees	

9. Name and Address of Current Registered Agent

MCDONALD, JOHN
2100 N. ATLANTIC AVE.
COCOA BEACH FL 32931

10. Name and Address of New Registered Agent

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 required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS

TITLE	P <input type="checkbox"/> DELETE
NAME	BUSSE, CHARLOTTE
STREET ADDRESS	2100 N ATLANTIC AVE UNIT #1203
CITY-ST-ZIP	COCOA BEACH FL
TITLE	VP <input type="checkbox"/> DELETE
NAME	LECOMPT, DAVID
STREET ADDRESS	2100 N ATLANTIC AVE 504
CITY-ST-ZIP	COCOA BEACH FL
TITLE	S <input type="checkbox"/> DELETE
NAME	ROELOF, SCHUILING
STREET ADDRESS	2100 N ATLANTIC AVE #503
CITY-ST-ZIP	COCOA BEACH FL
TITLE	T <input checked="" type="checkbox"/> DELETE
NAME	LUND, MARY
STREET ADDRESS	2100 N ATLANTIC AVE #205
CITY-ST-ZIP	COCOA BEACH FL
TITLE	D <input checked="" type="checkbox"/> DELETE
NAME	CORSI, DAINE
STREET ADDRESS	2100 N ATLANTIC AVE 1002
CITY-ST-ZIP	COCOA BEACH FL
TITLE	D <input checked="" type="checkbox"/> DELETE
NAME	HODAPP, MARK
STREET ADDRESS	2100 N ATLANTIC AVE 1001
CITY-ST-ZIP	COCOA BEACH FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	T <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.2 NAME	John McDonald
4.3 STREET ADDRESS	2100 N. Atlantic Ave. # 1105
4.4 CITY-ST-ZIP	Cocoa Beach, FL 32931
5.1 TITLE	S <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
5.2 NAME	Arnold Richman
5.3 STREET ADDRESS	2100 N. Atlantic Ave. # 901
5.4 CITY-ST-ZIP	Cocoa Beach, FL 32931
6.1 TITLE	VP <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
6.2 NAME	Barbara Trede
6.3 STREET ADDRESS	2100 N. Atlantic Ave. # 708
6.4 CITY-ST-ZIP	Cocoa Beach, FL 32931

14. I 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 attachment with an address, with all other like empowered.

SIGNATURE: John McDonald DATE: 15 April 99 DAYTIME PHONE #: 407-783-3000

CR2E037 (1/198)