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 # **744739** **(4)**

1. Corporation Name
CONDOMINIUM ASSOCIATION OF DRAKE TOWER, INC.

Principal Place of Business	Mailing Address
1800 N. ANDREWS AVE. FT. LAUDERDALE FL 33311	1800 N. ANDREWS AVE. FT. LAUDERDALE FL 33311

3. Date Incorporated or Qualified: **10/30/1978**
3a. Date of Last Report: **01/31/1995**

2. Principal Place of Business — 21
2a. Mailing Address — 26
Suite, Apt. #, etc. — 22 / 27
City & State — 23 / 28
Zip — 24 / 29
Country — 25 / 30

4. FEI Number: **59-1875030** ☐ 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

GASSER, JAMES P.
1800 N. ANDREWS AVENUE, #1L
FT. LAUDERDALE FL 33311

10. Name and Address of New Registered Agent

81 Name: GRACE GOTTLIEB
82 Street Address (P.O. Box Number is Not Acceptable): 1800 N. ANDREWS AVE # 11K
83
84 City: FT. LAUDERDALE **FL** 85 Zip Code: 33311

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: Grace Gottlieb GRACE Gottlieb 4/16/96
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD GOTTLIEB, GRACE 1800 N ANDREWS AVE #11-K FT LAUDERDALE, FL	☐ DELETE	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD KEEHN, BARBARA 1800 N ANDREWS AVE, #10-L FT LAUDERDALE, FL	☐ DELETE	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD BREEDLOVE, RALPH 921 SW 19TH STREET BOCA RATON, FL.	☒ DELETE	3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP	V D ROGERS BECKER 1800 N ANDREWS AVE # 2J FT LAUDERDALE, FLA 33311	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD MAINA, LINDA 1800 N ANDREWS AVE, #10H FT LAUDERDALE, FL	☒ DELETE	4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP	D MICHAEL SHARPE 1800 N. ANDREWS AVE # 2B FT. LAUDERDALE, FLA 33311	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD QUADT, IRENE 1800 N ANDREWS AVE, 11-A FT LAUDERDALE, FL	☐ DELETE	5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (12/95)

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: Grace Gottlieb PRESIDENT Grace Gottlieb 4/16/96 (954) 463-6593
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #