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Jan 22 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 # 745207 (1)
1. Corporation Name
PARKER TOWER CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business: 3140 SOUTH OCEAN DRIVE HALLANDALE FL 33009
Mailing Address: 3140 SOUTH OCEAN DRIVE HALLANDALE FL 33009-7245

3. Date Incorporated or Qualified: 12/12/1978
3a. Date of Last Report: 01/31/1996
4. FEI Number: 59-1920067
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

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

9. Name and Address of Current Registered Agent
FEIN, STEVEN
4700-B SHERIDAN ST.
HOLLYWOOD FL 33021

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	CALMER, CURT	
STREET ADDRESS	3140 S OCEAN DR., #2211	
CITY-ST-ZIP	HALLANDALE, FL 00000	
TITLE	VP	<input type="checkbox"/> DELETE
NAME	KITNER, MURRAY	
STREET ADDRESS	3140 S OCEAN DR., #1204	
CITY-ST-ZIP	HALLANDALE, FL 00000	
TITLE	T	<input type="checkbox"/> DELETE
NAME	MONTRONY, JOSEPH	
STREET ADDRESS	3140 S OCEAN DR., #2206	
CITY-ST-ZIP	HALLANDALE FL	
TITLE	S	<input type="checkbox"/> DELETE
NAME	BARON, SELMA	
STREET ADDRESS	31409 S OCEAN DRIVE, #404	
CITY-ST-ZIP	HALLANDALE, FL 00000	
TITLE	D	<input type="checkbox"/> DELETE
NAME	SWARTZ, RENEE	
STREET ADDRESS	3140 S OCEAN DRIVE, #312	
CITY-ST-ZIP	HALLANDALE FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	WARREN, ISRAEL	
STREET ADDRESS	3140 S OCEAN DRIVE, #2012	
CITY-ST-ZIP	HALLANDALE 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	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

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 attachment with an address.

SIGNATURE: *Curt Calmer* DATE: JAN 3 1997 DAYTIME PHONE: 954 5342

CR2E037 (9/96)