FILE NOW: FILING FEE IS \$61.25

NONPROFIT **CORPORATION** ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

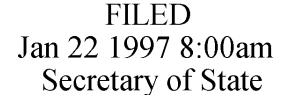
Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 DOCUMENT #

749735

THE EXECUTIVE CONDOMINIUM ASSOCIATION, INC.





Principal Place of Business		Mailing Address	Mailing Address		T TO BEST ENDET BEING TO SEE FOR DESTRUCTION OF THE BEST OF THE BEST OF THE OTHER DESTREES OF THE PROPERTY OF		
4925 COLLINS AVENUE MIAMI BEACH FL 33140		4925 COLLINS AVENUE MIAMI BEACH FL 33140-2740					
4925 COLLINS AVE		4925 COLLIN	4925 Collin) Ave. 2a. Mailing Address 26 1941. OFFICE			a. Date of Last Report 01/25/1996	
2. Prinçipal P	lace of Business	2a. Mailing Address		4. FEI Number	A	oplied For	
21 19	MT. OFFICE	26 11941. OF	FICE	59-2036940		ot Applicable	
Suite, Apt.		Suite, Apt. #, etc.		5. Certificate of Status Desired		Additional	
22 1-1.6 City & State		27 11 8 3 LC City & State	'			equired	
23 33140 USA				Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees		
Ζφ	Country	Zip	Country U.SA	8. This corporation has liability for i	713400		
24	25	29 30	$u \in \mathcal{A}$	Florida Statutes	Yes No	1. 190.002,	
•	9. Name and Address of Curre	ent Registered Agent		10. Name and Address of New Re	glatered Agent		
			81 Name				
SITONER, ROY				Address (P.O. Box Number is Not Acceptab	le)		
4925 COLLINS AVENUE				,			
MIAMI BEACH FL 33140							
			84 City		- 85 Zip	Code	
		**************************************			FL		
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-pamed 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 about the purpose of changing its registered office or registered agent, or both, in the State of Florida Such change was authorized by the 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 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 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 submits this statement for the purpose of changing its registered of the state of Florida Such change was authorized by the corporation of the state of Florida Such change was authorized by the corporation of the state of Florida Such change was authorized by the corporation of the state of Florida Such change was authorized by the corporation of the state of Florida Such change was authorized by the corporation of the state of Florida Such change was authorized by the state of Florida Such change was authorized by the state of Florida Such change was a state							
agent I am lamilar with, and accept the obligations of, Section 617.0503, Florida Statutes.							
SIGNATURE :	Signature Typed in printed han e of registered a		1 Con	1000	1/7/97		
12.		gent and lifte if applicable (NOTE: F	Registered Agent signal are i	required when reinstating) ADDITIONS/CHANGES TO OFFICE	DATE /	DO INI 10	
TITLE	SV	DELETE	11 TITLE 1/			Addition	
NAME	NORMAN CIMENT, ESQ.	4	12 NAME	P. NESTOR diVEI		Addition	
STREET ADDRESS	4925 COLLINS AVE		13 STREET ADDRESS	4925 COLUNS AVE	•		
CITY-SI-ZIP	MIAMI BEACH FL		1.4 City-St-ZiP	H. B. Jla. 33140		,	
THILE	P	⊠ DELETE		P	Change	Addition	
NAME	BELL, BROOKE	•	22 NAME	'RICHARD THOMAS			
STREET ADDRESS	4925 COLLINS AVE.		23 STREET ADDRESS	4925 COLLINS AVE	•		
CITY-ST-7IP	MIAMI BEACH FL		2 4 City-St-Zip	PRICHARD THOMAS 4925 COLLINS AVE H.B. Jla 33140			
TITLE	D	⊠ DELETE	31 TITLE	D	Change	Addition	
NAME	NIETO, FRANCISCO		3.2 NAME	FHANUEL HATLY	Corac	.	
STREET ADDRESS	4925 COLLINS AVE.		3 3 STREET ADDRESS	EMANUEL HATTY 4925 COLLINS AVE	•		
CITY-ST-ZIP	MIAMI BEACH FL		3 4. CITY-ST-ZIP	rio all agiro		.	
TITLE	ST	∑ DELETE	4.1 TITLE	SIT LILLIAN Epstein 4925 COLLINS AVE	/ Change	Addition	
NAME	SITZER, CAROLE	;	4. 2 NAME	LILLIAN EPSTELL	4		
STREET ADDRESS	4925 COLLINS AVE.		4.3 STREET ADDRESS	4925 COLLINS AVE			
CITY-ST-ZIP	MIAMI BEACH FL		4.4 CITY-ST-ZIP	H.B. FLa. 33140			
TITLE	D	☐ DELETE	5.1 TITLE		☐ Change	Addition	
NAME	SCHIFF, LOUIS		5.2 NAME	80000206			
STREET ADDRESS	4925 COLLINS AVENUE		5.3 STREET ADDRESS	-01/23/970100	18003	Ì	
CITY-ST-ZIP	MIAMI BEACH FL		5.4 CITY-ST-ZIP	***61.25			
TITLE		☐ DELETE	6.1 TITLE		☐ Change	Addition	
NAME			6.2 NAME			(D) M	
STREET ADDRESS			6.3 STREET ADDRESS		/		
CITY-SI-ZIP			6.4 CITY-ST-ZIP			A CO	

I do hereby certily 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: X

Daytime Phone # 0029645