FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

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

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 APR -7 AM 10:03

DOCUMENT # **751652** **(9)**

1. Corporation Name

TIDES TOWNHOMES HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business	Mailing Address
3824 N.E. 166 ST. NO MIAMI BCH FL 33160	3824 N.E. 166 ST. NO MIAMI BCH FL 33160

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 03/20/1980
3a. Date of Last Report: 06/07/1994
4. FEI Number: 59-0856194 ☐ Applied For ☐ Not Applicable

2. Principal Place of Business (21)	2a. Mailing Address (26)	5. Certificate of Status Desired ☐ — **$8.75** Additional Fee Required
Suite, Apt. #, etc. (22)	Suite, Apt. #, etc. (27)	6. Election Campaign Financing Trust Fund Contribution ☐ — **$5.00** May Be Added to Fees
City & State (23)	City & State (28)	7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ — **$68.75** Supplemental Fee Not Required
Zip (24) / Country (25)	Zip (29) / Country (30)	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
BARNHART, RUTH K. 3794 NE 166TH STREET NORTH MIAMI BEACH 33160	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 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE Ruth K. Barnhart 4/1/95
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when mailing) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	11 TITLE	☐ Change ☐ Addition
NAME	ABECKJERR, DAN	12 NAME	
STREET ADDRESS	3766 NE 166 ST.	13 STREET ADDRESS	
CITY-ST-ZIP	N. MIAMI BEACH FL	14 CITY-ST-ZIP	
TITLE	T	21 TITLE	☐ Change ☐ Addition
NAME	BARNHART, RUTH	22 NAME	
STREET ADDRESS	3794 NE 166TH ST.	23 STREET ADDRESS	
CITY-ST-ZIP	N. MIAMI BEACH FL	24 CITY-ST-ZIP	
TITLE	S	31 TITLE	☐ Change ☐ Addition
NAME	CIPOLLA, ROBERT	32 NAME	
STREET ADDRESS	3824 N.E. 166 ST.	33 STREET ADDRESS	
CITY ST ZIP	N. MIAMI BEACH FL	34 CITY-ST ZIP	
TITLE	D	41 TITLE	☐ Change ☐ Addition
NAME	DUGGAN, MICHAEL	42 NAME	
STREET ADDRESS	3814 NE 166TH ST	43 STREET ADDRESS	
CITY-ST-ZIP	N. MIAMI BEACH FL	44 CITY-ST ZIP	
TITLE	D	51 TITLE	☐ Change ☐ Addition
NAME	DELOCIENDA, FLAVIUIS	52 NAME	
STREET ADDRESS	3726 NE 166TH ST.	53 STREET ADDRESS	
CITY-ST ZIP	N. MIAMI BEACH FL	54 CITY ST ZIP	
TITLE	D	61 TITLE	☐ Change ☐ Addition
NAME	KUSHNER, WALTER	62 NAME	
STREET ADDRESS	3782 NE 166 m. St	63 STREET ADDRESS	
CITY ST ZIP	N. Miami Beach, FL.	64 CITY-ST ZIP	

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)(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: Ruth K. Barnhart, Treas. 4/1/95 305 945-7446
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — (Area Code & Daytime Phone Number)

0008628