

**FILED**  
**Apr 26, 1999 8:00 am**  
**Secretary of State**

04-26-1999 90199 001 \*\*\*\*61.25

NONPROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE  
 Katherine Harris  
 Secretary of State  
 DIVISION OF CORPORATIONS

DOCUMENT # 755993

1. Corporation Name  
 7 EAST CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business: 535 NE 7 AVENUE FT. LAUDERDALE FL 33301  
 Mailing Address: 535 NE 7 AVENUE FT. LAUDERDALE FL 33301



21	2. Principal Place of Business	2a	Mailing Address	3.	Date Incorporated or Qualified	01/21/1981
22	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4.	FBI Number	59-2478232
23	City & State	27	City & State	5.	Certificate of Status Desired	<input type="checkbox"/> \$8.75 Additional Fee Required
24	Zip	28	Zip	6.	Electin Campaign Financing Trust Fund Contribution	<input type="checkbox"/> \$5.00 May Be Added to Fees
25	Country	29	Country	30		

9.	Name and Address of Current Registered Agent	81	Name	10.	Name and Address of New Registered Agent
	TIGHE, TOM 800 E BROWARD BLVD STE 505 FT LAUDERDALE FL 33301	82	Street Address (P.O. Box Number is Not Acceptable)		
		83			
		84	City	85	Zip Code
			FL		

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: Tom Tighe DATE: 4-19-99

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PO	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SENKO, RICK	1.2 NAME	
STREET ADDRESS	575 NE 7TH AVE	1.3 STREET ADDRESS	
CITY-ST-ZIP	FT LAUDERDALE, FL 00000 <i>Pres.</i>	1.4 CITY-ST-ZIP	
TITLE	TD	2.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	ALEXANDER, STUART	2.2 NAME	<i>Robert Rosenberg</i>
STREET ADDRESS	543 NE 7TH AVE	2.3 STREET ADDRESS	<i>579 NE 7ave</i>
CITY-ST-ZIP	FT. LAUDERDALE FL	2.4 CITY-ST-ZIP	<i>FT. Laud. FL 33301 AT Large</i>
TITLE	VD	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KING, DOUGLAS	3.2 NAME	
STREET ADDRESS	571 NE 7TH AVE	3.3 STREET ADDRESS	
CITY-ST-ZIP	FT LAUDERDALE FL <i>Tres.</i>	3.4 CITY-ST-ZIP	
TITLE	ALD	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KING, HANZ	4.2 NAME	
STREET ADDRESS	575 NE 7TH AVE	4.3 STREET ADDRESS	
CITY-ST-ZIP	FT LAUDERDALE FL <i>V. Pres</i>	4.4 CITY-ST-ZIP	
TITLE	AL	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BOOTES, STEVE	5.2 NAME	
STREET ADDRESS	539 NE 7 AVE	5.3 STREET ADDRESS	
CITY-ST-ZIP	FT. LAUD. FL 33301 <i>at Large</i>	5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), 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, as an attachment with an address with a letter if empowered.

SIGNATURE: (Signature) DATE: 4-19-99

CR2E037 (1/198)