FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

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

DOCUMENT # **L72441** **(3)**

1. Corporation Name

GEORGETOWN CONDOMINIUM #2 INC.

Principal Place of Business	Mailing Address
2466 TAYLOR ST. HOLLYWOOD FL 33020	P.O. BOX 841233 PEMBROKE PINES FL 33084

3. Date Incorporated or Qualified: **05/11/1990**

3a. Date of Last Report: **02/14/1995**

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:

4. FEI Number: **59-2461947** ☐ 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

SLOTSKY, FRED
2686 OAKMONT
FT. LAUDERDALE FL 33332

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 607.0502 and 607.1508, Florida Statutes, this 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 this appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ DATE _____

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	SLOTSKY, MARILYN		1.2 NAME	
STREET ADDRESS	2686 OAKMONT		1.3 STREET ADDRESS	
CITY-ST-ZIP	FT. LAUDERDALE FL 33332		1.4 CITY-ST-ZIP	
TITLE	D	☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	BAUER, HOLLY		2.2 NAME	
STREET ADDRESS	2466 TAYLOR ST. APT 3D		2.3 STREET ADDRESS	
CITY-ST-ZIP	HOLLYWOOD FL 33020		2.4 CITY-ST-ZIP	
TITLE	D	☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME	SWEATT, LYNN		3.2 NAME	
STREET ADDRESS	2466 TAYLOR ST #4B		3.3 STREET ADDRESS	
CITY-ST-ZIP	HOLLYWOOD FL 33020		3.4 CITY-ST-ZIP	
TITLE	D	☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME	FLETCHER, JEAN		4.2 NAME	
STREET ADDRESS	2466 TAYLOR ST. APT 4D		4.3 STREET ADDRESS	
CITY-ST-ZIP	HOLLYWOOD FL 33020		4.4 CITY-ST-ZIP	
TITLE	T	☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME	SLOTSKY, FRED		5.2 NAME	
STREET ADDRESS	2686 OAKMONT		5.3 STREET ADDRESS	
CITY-ST-ZIP	FT. LAUDERDALE FL 33332		5.4 CITY-ST-ZIP	
TITLE	P	☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME	BAUER, HOLLY		6.2 NAME	
STREET ADDRESS	2466 TAYLOR ST. APT 3D		6.3 STREET ADDRESS	
CITY-ST-ZIP	HOLLYWOOD FL 33020		6.4 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Fred Slotsky FRED SLOTSKY 3 26 96 9545895678

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — DATE — DAYTIME PHONE NUMBER

CR2E034 (12/95)