

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 APR -3 AM 6:02

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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-04/06/95--01031--011
DO NOT WRITE IN THESE SPACES \$130.00

DOCUMENT # **A13344**

1. Corporation Name
TRUMP PLAZA OF THE PALM BEACHES CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business Mailing Address
525 South Flagler Dr. 525 South Flagler Dr.
West Palm Beach, FL West Palm Beach, FL
33401 33401

3. Date Incorporated or Qualified **02/07/86** 3a. Date of Last Report **02/21/94**

4. FEI Number **59-2466264** 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**

7. Nonprofit with IRS 501(c)(3) Tax Exempt Status **\$68.75 Supplemental Fee Not Required**

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes Yes No

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

9. Name and Address of Current Registered Agent
William P. Sklar
c/o Foley & Lardner
777 South Flagler Dr., Suite 200
West Palm Beach, FL 33401

10. Name and Address of New Registered Agent
81 Name **Valdes-Fauli Corporate Services, Inc.**
82 Street Address (P.O. Box Number is Not Acceptable) **777 So. Flagler Dr., Suite 500E**
83
84 City **West Palm Beach** 85 Zip Code **FL 33401**

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 *William P. Sklar* **William P. Sklar, Vice-President, Valdes-Fauli Corporate Services, Inc. 3-13-95**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when resigning) DATE

12. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P Smith, David 525 South Flagler Drive West Palm Beach, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T Mann, Walter H. 525 South Flagler Drive West Palm Beach, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Paddock, William 525 South Flagler Drive West Palm Beach, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Messic, Hellen 529 South Flagler Drive West Palm Beach, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Harrington, Frank L. 529 South Flagler Drive West Palm Beach, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	P/D William T. Carpenter 525 South Flagler Drive West Palm Beach, FL <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	T/D Charles T. Mountain 525 South Flagler Drive West Palm Beach, FL <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	S/D Frederick W. Rustmann, Jr. 529 South Flagler Drive West Palm Beach, FL <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	VP/D John Foster Green III 525 South Flagler Drive West Palm Beach, FL <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	D William R. Ronan 529 South Flagler Drive West Palm Beach, FL <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	T/S 4/13/95 <input type="checkbox"/> Change <input type="checkbox"/> Addition

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 110.07(3)(b), 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: *W. Sklar*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

March 15, 1995 (407) 655-2555