## FILE NOW: FILING FEE IS \$61.25

**NONPROFIT** CORPORATION ANNUAL REPORT



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

# 1884/101 201 1880 BOX POIN BOX DELIC SENS BOX BOX SON BOX 1100 1884 1884

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CR2E037 (12/95)

1996

DOCUMENT #
1. Corporation Name N95000003012 (0)

SUMMIT TOWER I OF DADELAND CONDOMINIUM ASSOCIATI ON, INC.

| Principal Place of Business |   |                         |   |                          | Mailing Address          |                                  |                     |                         |         |             |            | i nativier ein itret triiv |                     |                  |           |             |           |            |             |                   |
|-----------------------------|---|-------------------------|---|--------------------------|--------------------------|----------------------------------|---------------------|-------------------------|---------|-------------|------------|--|---------------------|------------------|-----------|-------------|-----------|------------|-------------|-------------------|
|                             | 1125 S.W. 77TH AVENUE<br>JIAMI FL 33156 |                         | 9125 S.W. 77TH AVENUE<br>MIAMI FL 33156                 |                          |                          |                                  |                     |                         |         |             |            |  |                     |                  |           |             |           |            |             |                   |
|                             |   |                         |   |                          |                          |                                  |                     |                         |         |             | -          | 3. Date  | Incorpc<br>06/23/   |                  | r Qualif  | ied         | 3a. [     | ate of L   | ast F       | Report            |
| 2. Principal Pl             | ace of Busin                            | ess                     |   | <del> </del>             | 1 .                      | Address                          |                     |                         |         |             |            | 4. FEI N   | Number              |                  |           |             |           |            | <u> </u>    | pplied For        |
| 21                          |   |                         |   | 26                       |                          | <b>.</b>                         |                     |                         |         |             |            |  |                     |                  |           |             |           |            |             | ot Applicable     |
| Suite, Apt.                 | #, etc.                                 |                         |   | 27                       | Suite,<br>]              | Apt. #, etc.                     |                     |                         |         |             |            | 5. Certi   | ficate of           | Status           | Desired   | t           |           |            |             | Additional        |
| City & State                | A                                       |                         | <del></del>   | 21                       | City &                   | State                            |                     | +                       |         | ···         | -+         | € Floor  | ion Com             |                  |           |             |           |            |             | equired           |
| 23                          | •                                       |                         |   | 28                       | ]                        | Oldio                            |                     |                         |         |             |            |  | ion Cam<br>t Fund C |                  |           | Ŋ           |           |            |             | May Be<br>to Fees |
| Zip                         | Country                                 |                         |   |                          | Zip                      |                                  |                     | Country                 | ountry  |             |            |  |                     |                  | -         | for inta    | naible 1  |            |             |                   |
| 24                          |   | 25                      |   | 29                       |                          |                                  |                     |                         |         |             |            | 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes  Yes No                |                     |                  |           |             |           |            |             |                   |
|                             | 9. Name                                 | and A                   | idress of Cur   | rent Regi                | stered A                 | gent                             |                     |                         | _       |             | 1          | 10. Nam  | e and A             | ddres            | s of Ne   | w Reg       | istered   | Agent      |             |                   |
|                             |   |                         |   |                          |                          |                                  |                     | 81                      |         | Name        |            |  |                     |                  |           |             |           |            |             |                   |
| FEINSTE                     | EIN, EDWAI                              |                         |   |                          |                          |                                  | †                   | Street A                | Address | (P.O. Bo    | x Numb     | eris No  | ot Acce             | ptable)          |           |             |           |            |             |                   |
| l                           | W. 77TH A                               |                         |   |                          | 63                       |                                  |                     |                         |         |             |            |  |                     |                  |           |             |           |            |             |                   |
| MIAMIF                      | L 33156                                 |                         |   |                          |                          |                                  |                     | 63                      | 1       |             |            |  |                     |                  |           |             |           |            |             |                   |
|                             |   |                         |   |                          |                          |                                  |                     | 64                      |         | City        | ···        |  |                     |                  | ··        | <del></del> | FL        | 85         | <b>Z</b> ip | Code              |
| 11. Pursuant t              | to the provisi                          | ons of S                | Sections 617.05   | 02 and 6                 | 17.1508,                 | Florida Statut                   | tes, the            | above-                  | na      | med co      | rporation  | n submit   | s this st           | etemen           | t for the | purpos      | se of ch  | anging     | its re      | gistered office   |
|                             | th, and acce                            | pt the o                | the State of Fl<br>oligations of, Se                    | ection 617               | 7.0503, F                | orida Statutes                   | s.                  | ine ciorp               | Ю       | ation s i   | Doard of   | Oirector   | s. i nere           | oy acc           | apt the   | appoint     | ment a    | s registe  | erea a      | agent. I am       |
| SIGNATURE .                 | Signature, typed                        | or printed              | name of registered ag                                   | ent and title            | if applicable.           | (NC                              | OTE: Regis          | stered Age              | nt s    | egnature re | quired whe | n reinstaling  | <u></u>             | ····             |           |             | DATE      |            |             |                   |
| 12.                         |   |                         | OFFICERS A  | AND DIRE                 | CTORS                    |                                  | T                   | 13.                     |         |             |            | ADDI   | TIONS/0             | HANG             | ES TO     | OFFICE      | RS AN     | D DIREC    | CTOF        | RS IN 12          |
| TITLE                       | ٥                                       |                         |   |                          |                          | DELETE                           |                     | 1.1 TITLE               |         |             | •          |  | _                   |                  |           |             |           | Chan       | ige         | Addition          |
| NAME                        | FEINSTI                                 | EIN, EC                 | WARD  |                          |                          |                                  |                     | 1.2 NAME                |         |             |            |  |                     |                  |           |             |           |            |             |                   |
| STREET ADDRESS              | 9125 S.                                 | W. 771                  | 'H AVENUE   |                          |                          |                                  |                     | 1.3 STREET              | T A     | DDRESS      |            |  |                     |                  |           |             |           |            |             |                   |
| CHTY-ST-ZIP                 | MIAMI F                                 | L 331                   | 6   |                          |                          |                                  | _                   | 1.4 CITY - S            | ST-     | ZIP         |            |  |                     |                  |           |             |           | ***        |             |                   |
| TITLE                       | D                                       | <b>.</b>                |   |                          |                          | DELETE                           |                     | 2.1 TITLE               |         |             |            |  |                     |                  |           |             |           | Chan       | ige         | Addition          |
| NAME                        |   | -                       | RTIMER  |                          |                          |                                  |                     | 2.2 NAME                |         | - 1         |            |  |                     |                  |           |             |           |            |             |                   |
| STREET ADDRESS              |   |                         | H AVENUE  |                          |                          |                                  | 1                   | 2.3 STREET              |         | i           |            |  |                     |                  |           |             |           |            |             |                   |
| CITY-ST-ZIP<br>TITLE        | MIAMI F                                 | L 331:                  | <u> </u>  |                          |                          | DELETE                           |                     | 2. 4 CITY-<br>3.1 TITLE | ST-     | - ZIP       |            |  |                     |                  |           |             |           | Chan       | ла          | Addition          |
| NAME                        | D<br>GRIFFIN                            | LIMP                    | ٨   |                          |                          | Detere                           |                     | 3.2 NAME                |         |             |            |  |                     |                  |           |             |           |            | ığα         | ☐ Muniton         |
| STREET ADDRESS              |   |                         | A<br>H Street   |                          |                          |                                  |                     | 3.3 STREET              | т аг    | 223900      |            |  |                     |                  |           |             |           |            |             |                   |
| CITY-ST-ZIP                 | MIAMI F                                 |                         |   |                          |                          |                                  |                     | 3.4. CITY -             |         |             |            |  |                     |                  |           |             |           |            |             |                   |
| TITLE                       | TIM MILL                                | - 4411                  | •¥  |                          |                          | DELETE                           |                     | 4.1 TiTLE               |         |             |            |  |                     |                  |           |             |           | ☐ Chan     | ge          | Addition          |
| NAME                        |   |                         |   |                          |                          |                                  |                     | 4. 2 NAME               |         |             |            |  |                     |                  |           |             |           |            |             |                   |
| STREET ADDRESS              |   |                         |   |                          |                          |                                  |                     | 4.3 STREET              | T AE    | ODRESS      |            |  |                     |                  |           |             |           |            |             |                   |
| CITY-ST-ZIP                 |   |                         |   |                          |                          | _                                |                     | 4.4 CITY - S            |         | ZIP         | ,          |  |                     |                  |           |             |           |            |             |                   |
| TITLE                       |   |                         |   |                          |                          | DELETE                           | !                   | 5.1 TITLE               |         | Ī           |            |  |                     |                  |           |             |           | Chan       | ge          | Addition          |
| NAME                        |   |                         |   |                          |                          |                                  |                     | 5.2 NAME                |         |             |            |  |                     |                  |           |             |           |            |             |                   |
| STREET ADDRESS              |   |                         |   |                          |                          |                                  |                     | 5.3 STREET              |         |             |            |  |                     |                  |           |             |           |            |             |                   |
| CITY-ST-ZIP                 |   |                         |   |                          |                          | DELETE                           |                     | 5.4 CITY - 5            | ST-     | ZIP         |            |  |                     |                  |           |             |           | <u> </u>   |             | T Agrees          |
| TITLE                       |   |                         |   |                          |                          | ויי אנרכון.                      |                     | B.1 TITLE               |         |             |            |  |                     |                  |           |             |           | Chan       | ge          | Addition          |
| NAME<br>OTREET ADDRESS      |   |                         |   |                          |                          |                                  |                     | 6.2 NAME                |         | 200000      |            |  |                     |                  |           |             |           |            |             |                   |
| STREET ADDRESS CITY-ST-ZIP  |   |                         |   |                          |                          |                                  |                     | 5 3 STREET              |         |             |            |  |                     |                  |           |             |           |            |             |                   |
| 14. I do hereb              | y certify that                          | the info                | rmation supplie   | d with thi               | s filing is              | voluntarily furn                 | nished a            | 6.4 CITY - S<br>and doe | es r    | not qual    | ify for th | e exemo  | tion sta            | ed in S          | ection    | 119.070     | 3)(k). FI | orida St   | atute       | s. I further      |
| certify that<br>oath: that  | t the informat<br>Lam an offic          | tion indi:<br>er or dir | cated on this ar<br>ector of the cor<br>3 if changed, o | nnual repo<br>poration i | ort or sup<br>or the rec | plemental ann<br>eiver or truste | iual rep<br>ie embo | ort is tru              | UΘ      | and acc     | curate ar  | nd that r  | ny siana            | ture sh          | all have  | the sar     | ne lega   | l effect a | asifr       | nade under        |
|                             |   |                         | Cour  |                          |                          |                                  |                     | ı                       |         |             |            |  | 1                   | / <sub>2,2</sub> | /_        | ,           | 2 ~ 4     | ~ . :      | 3 >         | 4400              |
| SIGNAT                      | UKE:                                    |                         | cemi  | <u> </u>                 |                          |                                  |                     |                         |         |             |            |  | 11                  | 13               | []        | <u> </u>    | 200       | ر - •      | , .         | 14.00             |