FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

DOCUMENT #

1. Corporation Name

N95000003012 (0)

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Country

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SUMMIT TOWER I OF DADELAND CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business 9125 S.W. 77TH AVENUE MIAMI FL 33156

Suite, Apt. #, etc.

City & State

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2. Principal Place of Business

Mailing Address

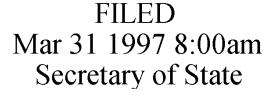
9125 S.W. 77TH AVENUE MIAMI FL 33156-7640

2a. Mailing Address

City & State

Zip

Suite, Apt. #, etc.





8. This corporation has liability for intangible tax under s. 199.032,

Yes No

3a. Date of Last Report

04/29/1996

Applied For

\$8.75 Additional

Fee Required

\$5.00 May Be

Added to Fees

0027656

Not Applicable

3. Date Incorporated or Qualified

APPLIED FOR

5. Certificate of Status Desired

6. Election Campaign Financing

Trust Fund Contribution

Florida Statutes

06/23/1995

4. FEI Number

Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent		
			81	N	ame	
FEINSTEIN, EDWARD 9125 S.W. 77TH AVENUE			62	2 Street Address (P.O. Box Number is Not Acceptable)		
				_		
MIAMĬ FL 33156			83	-		
			84	C	ity 85 Zip Code	
				<u> </u>	<u> </u>	
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 Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) DATE						
Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent si 12. OFFICERS AND DIRECTORS 13.				ent su	gnature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D OF TOUR PRINCE DIFF.	DELETE	1.1 TITLE		Change Addition	
NAME	FEINSTEIN, EDWARD		1.2 NAME			
STREET ADDRESS	manage at the property of the property and		1.3 STREET ADDRESS			
CITY-ST-ZIP	MIAMI FL 33156			37 - ZII		
TITLE	D	☐ DELETE	2.1 TITLE		Change Addition	
NAME	FELDMAN, MORTIMER 22		2.2 NAME			
STREEL ADDRESS	and the same of th		2.3 STREET	ADD	NESS	
CHY-ST-ZIP	MIAMI FL 33158 2.4		2. 4 CITY-5	ST-ZI	np [
TITLE	D DELETE 317		3.1 TITLE		☐ Change ☐ Addition	
NAME	or in 1 (1) correct		3.2 NAME]	
STREET ADDRESS	1318 N.W. 7TH STREET		3 3 STREET ADDRESS		PRESS	
CITY - S1 - ZIF	MIAMI FL 33125		3.4 CITY-5	ST- 21		
TITLE		☐ DELETE	4.1 TITLE		Change Addition	
NAME		Ī	4. 2 NAME		· [
STREET ADDRESS			4.3 STREET	ADD	PRESS	
CITY-ST-7iP			44 CITY-S	T - ZI		
TITLE		☐ DELETE	5.1 TITLE		Change Addition	
NAME			5.2 NAME		M 2.31.47	
STREET ADDRESS		ſ	5.3 STREET	ADD	AESS A DO	
CITY-ST-ZIP	······································	1 50,650	5.4 CITY-S	ST - ZU		
TITLE	621		61 TITLE			
NAME			6.2 NAME		-03/31/9701098005	
STREET ADDRESS]	6.3 STARET			
CITY-ST-ZIP	ve portion that the information numbered with this E	lina doss pat quellés de	6.4 CITY - S		<u>' , </u>	
14. I do hereby certify that the information supplied with this filling 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 charged, or on an attachment with an address.						

Country

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