FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

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1996

DOCUMENT #

SIGNATURE: __

N95000005032 (6)

COLONY PLAZA CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business Mailing Address						-		
307 SOUTH 21	ST AVENUE		307 SOUTH 21ST AVENUE					
HOLLYWOOD FL 33020		HOLI	HOLLYWOOD FL 33020			3. Date Incorporated or Qualified 10/24/1995	3a. Date of Last Report	
n District Dis	of Dunings	2a. Ma	iling Address			4. FEI Number		Applied For
. Principal Plac	e of Business	26	aing rad-occ			65-0613845		Not Applicable
Suite, Apt. #,	etc		ite, Apt. #, etc.			5. Certificate of Status Desired	1 1	75 Additional
]•	4.0.	27				V. Germicate of dictal post-	re	e Required
City & State		Cit	City & State			6. Election Campaign Financing	1 1	.00 May Be ded to Fees
		28			-:	Trust Fund Contribution 8. This corporation has liability for in		
Zip	Country	Zıç)	30	untry	Florida Statutes	Yes No	3. 100.0021
<u> </u>	9. Name and Address of Cu	29	ad Agent	30	T	10. Name and Address of New Re		
	9, Name and Address of Co	Tent Hogiston			81 Name	Good Vront		
					oo Stroot Add	CARU KORN)	
BIRDMAN	I, LOUIS				82 Street Add	ess (P.O. Box Number is Not Acceptable 20803 BISAMPE E	Wed STE	200
307 SOU	TH 21ST AVENUE				83			
HOLLYW	OOD FL 33020				24 04		85	Zip Code
					84 City	AVFIUTURA		<i>キ</i> スノクハ
1. Pursuant to	the provisione of Sections 617N	0502 and 647.1	508, Florida Statute	es, the ab	ove named corpo	ration submits this statement for the purp and of directors. I hereby accept the appoint	ose of changing it	ts registered offi red agent. I am
or registere	ed agent, or both, in the state of	ilorida./Sugh ch	nange was authorizi 33. Florida Statutes	ed by the i.	corporation's boa	ird of directors. Thereby accept the appoint	/ / /	oo agam a
	1, and accept the condations of		6	n nn M	Koen	2	1/16/86	
IGNATURE _	Signature of the or printed intine of registered	agent and the Lappi		TE Registere	d Agent signature require	ed when reinstating) ADD:TIONS/CHANGES TO OFFIC	DATE	TORS IN 15
2.	OFFICERS	S AND DIRECTO		13		ADDITIONS/CHANGES TO OFFI	Chan	
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CITY-ST-ZIP		1	F		4 CITY-ST-ZIP	y for the exemption stated in Section 119 trate and that my signature shall have the	.07(3)(k), Florida S	tatutes I further
certify tha	by certify that the information Bup at the information indicated on the LI am an officer or director of the n Block 12 or Block 13 if change	dorporation or	the receiver or trust	tee empo	rt is true and accu wered to execute	y for the exemption stated in Section 119 irate and that my signature shall have the this report as required by Chapter 617, Fl	same legal effect lorida Statutes; an	as if made unde id that my name

SIGNATURE AND THE D OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

LOUIS BIRDHUN - VSD 4/8/96 (454) 922 - 6070

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