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FILED  
Feb 16 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



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

DOCUMENT # P96000072514 (8)

1. Corporation Name

TOWN PROPERTIES OF FLORIDA, INC.



DO NOT WRITE IN THIS SPACE

Principal Place of Business 101 SE 21ST ST FORT LAUDERDALE FL 33316		Mailing Address 101 SE 21ST ST FORT LAUDERDALE FL 33316	
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 Zip	
24 Country		29 Country	
25		30	
9. Name and Address of Current Registered Agent WIESCHENBERG, CARL L 101 SE 21ST ST FORT LAUDERDALE FL 33316		10. Name and Address of New Registered Agent	
81 Name		82 Street Address (P.O. Box Number is Not Acceptable)	
83		84 City	
85 Zip Code		FL	

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

1-30-98

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	NAME	1.1 TITLE	1.2 NAME
STREET ADDRESS	101 SE 21ST ST	1.3 STREET ADDRESS	1.4 CITY - ST - ZIP
CITY - ST - ZIP	FT LAUDERDALE FL	2.1 TITLE	2.2 NAME
TITLE	NAME	2.3 STREET ADDRESS	2.4 CITY - ST - ZIP
STREET ADDRESS	311 LIDO DR	3.1 TITLE	3.2 NAME
CITY - ST - ZIP	FT LAUDERDALE FL	3.3 STREET ADDRESS	3.4 CITY - ST - ZIP
TITLE	NAME	4.1 TITLE	4.2 NAME
STREET ADDRESS	101 SE 21ST ST	4.3 STREET ADDRESS	4.4 CITY - ST - ZIP
CITY - ST - ZIP	FT LAUDERDALE FL	5.1 TITLE	5.2 NAME
TITLE	NAME	5.3 STREET ADDRESS	5.4 CITY - ST - ZIP
STREET ADDRESS		6.1 TITLE	6.2 NAME
CITY - ST - ZIP		6.3 STREET ADDRESS	6.4 CITY - ST - ZIP

14. I hereby certify that the information supplied with this filing 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

CR2E034 (10/97)