

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



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

DOCUMENT # **V05744** (0)

1. Corporation Name

NTW PROPERTIES, INC.

Principal Office Address

**1400 CENTRE PARK BLVD
SUITE 300
WEST PALM BEACH FL 33401**

Mailing Address

**1400 CENTRE PARK BLVD
SUITE 300
WEST PALM BEACH FL 33401**

ENTER WITHIN THIS SPACE

3. Date Report Expires (or Liquidated)	3a. Date of Last Report
01/09/1992	06/30/1994
4. FIC Number	Applied for Not Applicable
65-0303194	
5. Certificate of Status Deceased	☐ \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution	☐ \$5.00 May Be Added to Fees
8. This corporation has been organized in compliance with Chapter 2, 1989 Laws, Florida Statutes.	☐ Yes ☐ No

2. Principal Office Address	2a. Mailing Address
21. 580 VILLAGE BLVD	26. SAME AS #2
22. #150	27. Suite Apt. # etc.
23. 11000 Palm Beach	28. City & State
24. 33401	29. FL
30. 30	

9. Name and Address of Current Registered Agent

**WATSON, JAMES
1672 FEATHER TRL
WEST PALM BEACH FL 33411**

10. Name and Address of New Registered Agent

81. Name	ROBERT NEEDLE
82. Street Address, P.O. Box Number is Not Applicable	580 VILLAGE BLVD #15
83. City	WEST PALM BEACH
84. State	FL
85. Zip Code	33411

11. I, the undersigned, being a duly qualified officer or director of the corporation, hereby certify that the above named corporation submits this statement for the purpose of changing its registered office as provided for in Chapter 2, 1989 Laws, Florida Statutes. Such change was authorized by the corporation's board of directors, I hereby accept the appointment as registered agent. I am a resident of the State of Florida.

Signed and sworn to before me on this 15th day of May, 1995, at West Palm Beach, Florida.

12. OFFICERS AND DIRECTORS	13. ADDITIONS-CHANGES TO OFFICERS AND DIRECTORS																														
<table border="1"> <tr> <td>NAME</td> <td>DP</td> </tr> <tr> <td>STREET ADDRESS</td> <td>THEIRAN, RICHARD C.</td> </tr> <tr> <td>CITY</td> <td>6780 HAMMOCK LN</td> </tr> <tr> <td>STATE</td> <td>WEST PALM BEACH FL</td> </tr> <tr> <td>ZIP CODE</td> <td></td> </tr> <tr> <td>NAME</td> <td>DST</td> </tr> <tr> <td>STREET ADDRESS</td> <td>WATSON, JAMES</td> </tr> <tr> <td>CITY</td> <td>1672 FEATHER TRL</td> </tr> <tr> <td>STATE</td> <td>WEST PALM BEACH FL</td> </tr> <tr> <td>ZIP CODE</td> <td></td> </tr> </table>	NAME	DP	STREET ADDRESS	THEIRAN, RICHARD C.	CITY	6780 HAMMOCK LN	STATE	WEST PALM BEACH FL	ZIP CODE		NAME	DST	STREET ADDRESS	WATSON, JAMES	CITY	1672 FEATHER TRL	STATE	WEST PALM BEACH FL	ZIP CODE		<table border="1"> <tr> <td>NAME</td> <td>ROBERT NEEDLE</td> </tr> <tr> <td>STREET ADDRESS</td> <td>580 VILLAGE BLVD #15</td> </tr> <tr> <td>CITY</td> <td>WEST PALM BEACH</td> </tr> <tr> <td>STATE</td> <td>FL</td> </tr> <tr> <td>ZIP CODE</td> <td>33411</td> </tr> </table>	NAME	ROBERT NEEDLE	STREET ADDRESS	580 VILLAGE BLVD #15	CITY	WEST PALM BEACH	STATE	FL	ZIP CODE	33411
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14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and that, not guilty for the exemption stated in Chapter 2, 1989 Laws, Florida Statutes. I further certify that the information included on this annual report or supplemental annual report is true and accurate and that my signature shall be in the same legal effect as if made under oath. I am an officer or director of this corporation or the registered agent designated to receive this report as required by Chapter 2, 1989 Laws, Florida Statutes, and that my name appears on Block 1 of Block A. I have changed, or not up full agreement with the address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR