

FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # 708618 (4)

1. Corporation Name
1500 CORAL TOWERS CONDOMINIUM, INC.



Principal Place of Business: 1500 N. E. 127TH STREET NORTH MIAMI FL 33161
Mailing Address: 1500 N. E. 127TH STREET NORTH MIAMI FL 33161

3. Date Incorporated or Qualified: 02/23/1965
3a. Date of Last Report: 07/17/1995
4. FEI Number: 59-1118683
5. Certificate of Status Desired: \$8.75 Additional Fee Required
6. Election Campaign Financing: \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

2. Principal Place of Business: 21, 22, 23, 24
2a. Mailing Address: 26, 27, 28, 29, 30

9. Name and Address of Current Registered Agent
JONES, EVELYN
1500 NE 127TH ST
N MIAMI FL 33161

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 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: *Evelyn Jones* (NOTE: Registered Agent signature required when reinstating) DATE: Apr 11, 1996

12. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> DELETE
NAME	SWARTZBAUGH, JASON	
STREET ADDRESS	1500 NE 127TH ST	
CITY-ST-ZIP	N MIAMI, FL 00000	
TITLE	SOTD	<input type="checkbox"/> DELETE
NAME	JONES, EVELYN	
STREET ADDRESS	1500 NE 127TH ST	
CITY-ST-ZIP	NO. MIAMI FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	CARPENTER, ELENA	
STREET ADDRESS	1500 NE 127TH ST	
CITY-ST-ZIP	N MIAMI, FL 00000	
TITLE	VD	<input type="checkbox"/> DELETE
NAME	MCGEORGE, BILL	
STREET ADDRESS	1500 NE 127TH ST	
CITY-ST-ZIP	N MIAMI FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	BRADLEY, BOB	
STREET ADDRESS	1500 NE 127TH ST	
CITY-ST-ZIP	NORTH MIAMI FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	Solomon Kosho
5.3 STREET ADDRESS	1500 NE 127 St.
5.4 CITY-ST-ZIP	N. Miami, Fla. 33161
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 changed, or on an attachment with an address.

SIGNATURE: *Evelyn Jones* DATE: Apr 11, 1996

CR2E037 (12/95)