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Jan 17 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997



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

DOCUMENT # 712233 (6)

1. Corporation Name

TALL OCEAN BEACH CONDOMINIUM APTS., INC.



Principal Place of Business

Mailing Address

755 OCEAN DR WEST
KEY COLONY BEACH FL 33051

75 OCEAN DRIVE
P. O. BOX 2
KEY COLONY BEACH FL 33051
US

3. Date Incorporated or Qualified
02/10/1967

3a. Date of Last Report
01/31/1996

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt #, etc.

26 Suite, Apt #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24

25

29

30

4. FEI Number
59-1860206

Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

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

Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

STOHL, STEPHEN A.
755 OCEAN DR W
KEY COLONY BCH, FL
33051

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE TD
NAME LAMANTIA, NANCY
STREET ADDRESS 755 OCEAN DR WEST
CITY-ST-ZIP KEY COLONY BEACH FL

1.1 TITLE TD
1.2 NAME DENRENS, ALBERT W.
1.3 STREET ADDRESS 755 W. OCEAN DR.
1.4 CITY-ST-ZIP KEY COLONY Bch. FL 33051

TITLE SD
NAME BOWERS, LUCILLE
STREET ADDRESS 755 OCEAN DR WEST
CITY-ST-ZIP KEY COLONY BCH FL

2.1 TITLE SD
2.2 NAME JUVÉ, MARILYN
2.3 STREET ADDRESS 755 W. OCEAN DR.
2.4 CITY-ST-ZIP KEY COLONY Bch. FL 33051

TITLE D
NAME LEAVITT, SAMUEL
STREET ADDRESS 755 OCEAN DR WEST
CITY-ST-ZIP KEY COLONY BEACH FL

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE P
NAME LAMANTIA, ISADORE
STREET ADDRESS 755 OCEAN DRIVE WEST
CITY-ST-ZIP KEY COLONY BEACH FL

4.1 TITLE P.D.
4.2 NAME RICHARD RHODA
4.3 STREET ADDRESS 755 W. OCEAN DR
4.4 CITY-ST-ZIP KEY COLONY Bch. FL 33051

TITLE D
NAME STOHL, STEPHEN A.
STREET ADDRESS 755 OCEAN DR WEST
CITY-ST-ZIP KEY COLONY BEACH FL

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: RICHARD RHODA

1-7-97 805-743 8525

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone # 0078176

CR2E037 (9/96)