

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 07, 2006 8:00 am
Secretary of State

03-07-2006 90005 025 ***150.00

DOCUMENT # 261634 1. Entity Name GALT PLAZA APARTMENTS, INC.					
Principal Place of Business 3200 N E 36 ST FORT LAUDERDALE, FL 33308			Mailing Address 3200 N E 36 ST FORT LAUDERDALE, FL 33308		
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State Zip Country		City & State Zip Country		4. FEI Number 59-1027000	
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required				Applied For ☐ Not Applicable	
6. Name and Address of Current Registered Agent POLIAKOFF, GARY C/O BECKER & POLIAKOFF, P.A. 3111 STIRLING ROAD FT LAUDERDALE, FL 33312					
7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code					
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE					
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00			9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	BM SMITH, ROBERT 3200 NE 36 ST FORT LAUDERDALE, FL 33308	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRESIDENT BLANKEN, MARY LOU 3200 NE 36 ST FT. LAUD FL 33308	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TREASURER GILLIGAN, JAMES B. JR. 3200 NE 36 ST FT LAUDERDALE, FL 33308	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	BM DON LARSON 3200 NE 36 ST Ft. Land, FL 33308	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T VINCENT, KENNETH 3200 NE 36 STREET FORT LAUDERDALE, FL 33308	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	BM LOUIS CORGLIANO 3200 NE 36 ST Ft. Land FL 33308	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP BOHLANDER, FRANK 3200 NE 36 ST FORT LAUDERDALE, FL 33308	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP WILMA BECKER 3200 NE 36 ST Ft. Land, FL 33308	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	BM BARNARD, ANN 3200 NE 36TH STREET FORT LAUDERDALE, FL 33308	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SECRETARY HITZ, GORINE L CORINNE, L. 3200 NE 36TH ST FT LAUDERDALE, FL 33308	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: MARY LOU BLANKEN, PRES <i>Mary Lou Blanken</i> 2/25/06 954-524-6328 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #					