

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # 822350 (5)

1. Corporation Name

ITT COMMUNITY DEVELOPMENT CORPORATION



Principal Place of Business

Mailing Address

EXECUTIVE OFFICES  
1 CORPORATE DRIVE  
PALM COAST FL 32151

EXECUTIVE OFFICES  
1 CORPORATE DRIVE  
PALM COAST FL 32151

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

23 City & State

27 City & State

24 Zip

25 Country

29 Zip

30 Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CT CORPORATION SYSTEM  
1200 S. PINE ISLAND ROAD  
PLANTATION FL 33324

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 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 for corporation)

NOTE: Registered Agent signature required when submitting

DATE

12.

OFFICERS AND DIRECTORS

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D  
NAME BOWMAN, ROBERT A.  
STREET ADDRESS 1330 AVE. OF THE AMERICA  
CITY-ST-ZIP NEW YORK NY

☐ DELETE

1.1 TITLE ☐ Change ☐ Addition

TITLE PD  
NAME GARDNER, JAMES E.  
STREET ADDRESS EXECUTIVE OFFICES, 1 CORPORATE DRIVE  
CITY-ST-ZIP PALM COAST FL

☐ DELETE

2.1 TITLE ☐ Change ☐ Addition

TITLE EVP  
NAME ARBERG, LEE W  
STREET ADDRESS EXECUTIVE OFFICES, 1 CORPORATE DRIVE  
CITY-ST-ZIP PALM COAST FL

☐ DELETE

3.1 TITLE ☐ Change ☐ Addition

TITLE S  
NAME CUFF, ROBERT G., JR.  
STREET ADDRESS EXECUTIVE OFFICES, 1 CORPORATE DRIVE  
CITY-ST-ZIP PALM COAST FL

☐ DELETE

4.1 TITLE ☐ Change ☐ Addition

TITLE VP  
NAME BUTLER, SAM, JR  
STREET ADDRESS EXECUTIVE OFFICES, 1 CORPORATE DRIVE  
CITY-ST-ZIP PALM COAST FL

☐ DELETE

5.1 TITLE ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ DELETE

6.1 TITLE ☐ Change ☐ 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Robert G. Cuff

2/13/96

(904)445-2677

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

Day Phone #

CR2E034 (12/95)