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May 06 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Bandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT #

L44815

1. Corporation Name

THE BLUFFS SHOPPING CENTER CORPORATION

Principal Place of Business

Mailing Address

2401 PGA Blvd., Suite 168
Palm Beach Gardens, FL 33410

3. Date Incorporated or Qualified
1/19/90

3a. Date of Last Report
2/29/96

2. Principal Place of Business

21 2401 PGA Blvd., Suite 168

2a. Mailing Address

26 Suite, Apt. #, etc.

22 Suite 280

27 Suite 280

City & State

City & State

23 Palm Beach Gardens, FL

28 City & State

Zip

Country

Zip

Country

24 33410

25 Palm Beach

29

30

4. FEI Number

65-0172554

Applied For

Not Applicable

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

JAYNE REGESTER BARKDULL, ESQUIRE
LEVY, KNEEN, MARIANI, CURTIN,
WIENER, KORNFELD & DEL RUTTO, P.A.
1400 Centrepark Blvd., Suite 1000
West Palm Beach, Florida 33401

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 807.0502 and 807.1508, 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 807.0503, Florida Statutes.

SIGNATURE

Signature (type or print name of registered agent and fee if applicable)

(NOTE: Registered Agent Signature required when registering)

DAY

12. OFFICERS AND DIRECTORS

TITLE PD
NAME PRESTON, JOHN W.
STREET ADDRESS 2401 PGA Blvd., Suite 820
CITY-ST-ZIP Palm Beach Gardens, FL 33401

☐ DELETE

TITLE VD
NAME COHEN, PETER F.
STREET ADDRESS 2851 John Street, Suite One
CITY-ST-ZIP Markha, Ontario, Canada L3R 5S7

☐ DELETE

TITLE STD
NAME GREEN, ROBERT S.
STREET ADDRESS 2851 John Street, Suite One
CITY-ST-ZIP Markham, Ontario, Canada L3R 5R7

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 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 807, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Robert S. Green April 15, 1997 (905) 477-9200

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/96)

400002414054

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5/6/97

900002177139
05/13/97--01091--005
***165.00