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**PROFIT** CORPORATION ANNUAL REPORT



ELORIDA DEPARTMENT DE STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## 1998 DOCUMENT # P97000106851 (3)

CANSOUTH DEVELOPMENT CORP.

## FILED Mar 23 1998 8:00am Secretary of State



Principal Place of Business Mailing Address 5009 PARK CENTRAL DR ORLANDO FL 32839 5009 PARK CENTRAL DR ORLANDO FL 32839 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 12/19/1997 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 21 26 59-3487093 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Country Zio 8. This corporation owes or has paid the current year Intangible Yes 24 29 30 Personal Property Tax due June 30. 25 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name JOHNSON, LORAN A 215 N EOLA DR Street Address (P.O. Box Number is Not Acceptable) ORLANDO FL 32801 83 84 City 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 and title it applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Change . TITLE 1.1 TITLE **DPAS** NAME MORTON, HENRY 1.2 NAME MORTON, HENRY 1090 DON MILLS ROAD STE 600 STREET ADDRESS 1.3 STREET ADDRESS 1090 DON MILLS RD, SUITE 600 DON MILLS, ONTARIO, CANADA CITY-ST-ZIP ONTARIO, CANADA M3C3R6 1.4 CITY-ST-ZIP DELETE 21 TITLE TITLE Change NAME MORTON, PAUL 2.2 NAME MORTON, PAUL 1090 DON MILLS ROAD STE 600 STREET ADDRESS 1090 DON MILLS RD, SUITE 600 2.3 STREET ADDRESS DON MILLS, ONTARIO, CANADA CITY-ST-ZIP ONTARIO, CANADA M3C3R6 2.4 CITY-ST-ZIP DELETE TITLE 3.1 TITLE • DVPS NAME 3.2 NAME SLATER. JOEL K SLATER, JOEL K 3.3 STREET ADDRESS STREET ADDRESS 5009 PARK CENTRAL DR 5009 PARK CENTRAL DRIVE CITY-ST-ZIP ORLANDO FL 32839 3.4. CITY-ST-ZIP ORLANDO, FL #0\*! Change DELETE Addition TITLE 4.1 TITLE DVP NAME 4.2 NAME GOLDBERG, LAURENCE 488 HURON STREET STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP TORONTO, ONTARIO, CANADA DELETE THILE 5.1 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 CITY-ST-ZIP

14. I 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 suppliemonal armital 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 trusted 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 allochment with an address.

HENRUA MORTON