FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION **ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

SIGNATURE:

DOCUMENT # V47154

GREENFIELD KATZ DEVELOPMENT COMPANY

FILED

May 13 1998 8:00am

Secretary of State

Principal Place of Business Mailing Address							11 B1 B11 B1 B18 B1B11 B1 B1 B	1011 G1611 1601
ONE LINCOLN 1900 GLADES BOCA RATON	ROAD. SUITE 400	ONE LINCOLN PLACE 1900 GLADES ROAD. SUITE 400 BOCA RATON FL 33431				IN THIS SPACE	·	
						ated or Qualified		
9 Principal P	lace of Business	2a. Mailing Address			06/30/199 4. FEI Number	<u> </u>		Applied For
	GLADES ROAD	26 2300 GLAN	2 - R			30)	Applied For
Suite, Apt.		Suito, Apt. #, etc.	/e 5 P	7	65-03476	0/8	- \$8.7F	Not Applicable Additional
	€ 100 E	27 SVITE 100			5. Certificate of	Status Desired	1 1 7 2	Regulred
City & State	9	City & State	<u> </u>		6. Election Cam	naign Financing		May Be
23 BOCA	RATON, FL	28 BOCA RAT	ON.	FL	Trust Fund Co			d to Fees
Zip	Country	Zip	Countr	у	8. This corporati	on owes or has pa	aid the current year	Intangible
24 334	3 1 25	29 33431	30			erty Tax due June		□ No
	9. Name and Address of Curren	nt Registered Agent			10. Name and A	dress of New Re	gistered Agent	
GREENFIELD, WILLIAM R.				Name				
	1900 GLADES ROAD				dress (P.O. Box Numb	er is Not Acceptat	ole)	
SUITE 400					GLADES A	COAD		
BOCA RATON FL 33431				Sum	= 100 =			
			84		£ 100 E		85 Zi	p Code
	to the provisions of Sections 607.050			BOCA	RATON	FL	<u> </u>	3431
office or r agent. I a SIGNATURE	egistered agent, or both, in the State in familiar with, and accept the obligation of printed trains of registered age.	ations of, Section 607.0505, Fl	orida Statute	ð\$.	ation's board of directory	ors. I hereby accep	pt the appointment a	as registered
12.	OFFICERS AND		13.	tour signature recti		IANGES TO DEEL	CERS AND DIRECTO	ORS IN 12
TITLE	DP	DELETE	1.1 30TLE		ADDITIONO/OI	IANGES TO OTTIC	☐ Change	
NAME	GREENFIELD, WILLIAM R.		1.2 NAME	1				
STREET ADDRESS	1400 S.W. 19TH ST. 2.300	GLADES PORD		r address				
CITY-ST-ZIP			1.4 CITY-					
TITLE	D	/17 100 E/	21 THLE	-			Change	e
NAME	GREENFIELD, MARGARET		2.2 NAME	ĺ			_	
STREET ADDRESS	1400-9:W: 19TH ST. 2300	GLADES ROAD	2.3 STREE	T ADDRESS				
CITY-ST-ZIP		ITE 100E	2. 4 CITY-	ST-7IP				
TITLE	D	DELETE	3.1 TITLE				Change	e Addition
NAME	KATZ, STANLEY M		3.2 NAME					
STREET ADDRESS	2 N. BREAKERS ROW, N45		3.3 STREE	1 ADDRESS				
CITY-ST-ZIP	PALM BEACH FL 33480		3.4. CITY-	ST-ZIP				
TITLE		DELETE	4.1 TITLE				☐ Change	e Addition
NAME			4. 2 NAME					
STREET ADDRESS			4.3 STREE	T ADDRESS				
CITY-ST-ZIP	<u> </u>		4,4 CITY-	ST-ZIP				·
TITLE		☐ DELETE	5.1 TITLE				Change	e 🔲 Addition
NAME			5.2 NAME				•	
STREET ADDRESS			5.3 S1REE	T ADDRESS				
CITY-ST-ZIP			5.4 CiTY -	ST - ZIP				
TITLE		☐ DELETE	6.1 TITLE	["		 _	☐ Change	B Addition
NAME			62 NAME					
STREET ADDRESS			6.3 STREE	T ADDRESS				
CITY-ST-ZIP			6.4 CITY - 5					
14. I hereby of	certify that the information supplied with on this annual report or supplementa	ith this filing does not qualify following and and	or the exemp	otion stated in	n Section 119.07(3)(i),	Florida Statutes. I	further certify that the	ne information
officer or of Block 12 of	director of the corporation or the reco or Block 13 if changed, or on an attack	piver entrustee empowered to chimen with an address.	execute this	report as red	quired by Chapter 607	, Florida Statutes;	and that my name a	appears in

4/30/98