FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B Mortham Secretary of State DIVISION OF CORPORATIONS

1996

DOCUMENT # 1. Corporation Name N35748

(5)

CHAPEL TRAIL CORPORATE PARK ASSOCIATION, INC. Principal Place of Business Mailing Address							
9000 SHERID		9000 SHERIDAN ST					
					3. Date Incorporated or Qualified 12/19/1989	3a. Date of 02/2	ast Report 0/1995
2. Principal Pla	ace of Business	2a. Mailing Address			4. FE! Number 65-0170500		Applied For Not Applicable
Suite, Apt. #, etc. 2 City & State 3 Zip Country 4 25		Suite, Apt. #, etc. 27 City & State 28 Zip Country 29 30		5. Certificate of Status Desired	\$8.75 Additiona		
				6. Election Campaign Financing	\$	5.00 May Be	
				у	Trust Fund Contribution 8. This corporation has liability for in Florida Statutes		Added to Fees intangible tax under s. 199.032, ☐ Yes ☐ No
	9. Name and Address of Currer	nt Registered Agent			10. Name and Address of New R		
		-	8	1 Name			
KOENIG, PAUL				Street Address (P.O. Box Number is Not Acceptable)			
	Heridan St DKE Pines FL 33021		8	3			
			8	4 City		FL 85	Zip Code
11. Pursuant t	to the provisions of Sections 617.0502 ed agent, or both, in the State of Flori	2 and 617.1508, Florida Statu da, Such change was authori	tes, the above	-named corpor	ration submits this statement for the purp rd of directors. I hereby accept the appo	pose of changing pintment as regist	its registered office ered agent. I am
tamiliar wit SIGNATURE	th, and accept the obligations of, Sect Signature, typed or printed name of registered agent	tion 617.0503, Florida Statute	S.			DATE	
tamiliar wit SIGNATURE	in, and accept the obligations of, Sect Signature, typed or printed name of registered agent	tion 617.0503, Florida Statute	S.	ont signaturo require		DATE	CTORS IN 12
SIGNATURE _	in, and accept the obligations of, Sect Signature, typed or printed name of registered agent	tion 617.0503, Flonda Statute	S. OTt: Registered Ag	ont signaturo requive	d when renstating)	DATE	- · · · · · · · · · · · · · · · · · · ·
SIGNATURE _ 12.	in, and accept the obligations of, Sect Signature, typed or printed name of registered agent OFFICERS AN	tion 617.0503, Florida Statute and title if applicable (N D DIRECTORS	OTL: Registered Ag	ont signature require	d when renstating)	DATE CERS AND DIRE	- · · · · · · · · · · · · · · · · · · ·
SIGNATURE _ 12. IIILE NAME	In, and accept the obligations of, Sect Signature, typed or printed name of registered agent OFFICERS AN	tion 617.0503, Florida Statute and title if applicable (N D DIRECTORS	OTE: Registered Ag 13. 1.1 TITLE 1.2 NAMI	ont signature require	d when renstating)	DATE CERS AND DIRE	- · · · · · · · · · · · · · · · · · · ·
SIGNATURE _ 12. TITLE NAME STREET ADDRESS	In, and accept the obligations of, Section Signature, typed or printed name of registered agent OFFICERS AN PD KOENIG, PAUL	tion 617.0503, Florida Statute and title if applicable (N D DIRECTORS	OTE: Registered Ag 13. 1.1 TITLE 1.2 NAMI	ont signaturo requiro	d when renstating)	DATE CERS AND DIRE	- · · · · · · · · · · · · · · · · · · ·
SIGNATURE _ 12. TITLE NAME STREET ADDRESS DITY-ST-ZIP	Signature, typed or printed name of registered agent OFFICERS AN PD KOENIG, PAUL 9000 SHERIDAN ST #130 PEMBROKE PINES FL VTD	tion 617.0503, Florida Statute and title if applicable (N D DIRECTORS	OTE: Registered Ag 13. 1.1 TITLE 1.2 NAMI	ont signaturo requiro	d when renstating)	DATE CERS AND DIRE	nge 🔲 Addition
SIGNATURE	Signature, typed or printed name of registered agent OFFICERS AN PD KOENIG, PAUL 9000 SHERIDAN ST #130 PEMBROKE PINES FL VTD CORNFELD, JEFFREY	t and title if applicable (N D DIRECTORS	OTE: Registered Ag 13. 1.1 TITLE 1.2 NAM! 1.3 STRE! 1.4 CITY	T ADDRESS	d when renstating)	DATE CERS AND DIRECT Char	nge [] Addition
SIGNATURE	Signature, typed or printed name of registered agen OFFICERS AN PD KOENIG, PAUL 9000 SHERIDAN ST #130 PEMBROKE PINES FL VTD CORNFELD, JEFFREY 9000 SHERIDAN ST #130	t and title if applicable (N D DIRECTORS	S	T ADDRESS	d when renstating)	DATE CERS AND DIRECT Char	nge 🔲 Addition
SIGNATURE	Signature, typed or printed name of registered agen OFFICERS AN PD KOENIG, PAUL 9000 SHERIDAN ST #130 PEMBROKE PINES FL VTD CORNFELD, JEFFREY 9000 SHERIDAN ST #130 PEMBROKE PINES FL	tion 617.0503, Florida Statute t and title if applicable (N D DIRECTORS DELETE	S. OTL: Registered Ag 13. 1.1 TITLE 1.2 NAMI 1.3 STRE 1.4 CITY 2.1 TITLE 2.2 NAMI 2.3 STREI 2.4 CITY	T ADDRESS	d when renstating)	DATE CERS AND DIRECT Char Char	nge Addition
SIGNATURE _ 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Signature, typed or printed name of registered agent OFFICERS AN PD KOENIG, PAUL 9000 SHERIDAN ST #130 PEMBROKE PINES FL VTD CORNFELD, JEFFREY 9000 SHERIDAN ST #130 PEMBROKE PINES FL VSD	t and title if applicable (N D DIRECTORS	S	ET ADDRESS ST-ZIP ET ADDRESS -ST-ZIP	d when renstating)	DATE CERS AND DIRECT Char	nge Addition
SIGNATURE _ 12. TITLE NAME SIREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE VAME VAME VAME	Signature, typed or printed name of registered agent OFFICERS AN PD KOENIG, PAUL 9000 SHERIDAN ST #130 PEMBROKE PINES FL VTD CORNFELD, JEFFREY 9000 SHERIDAN ST #130 PEMBROKE PINES FL VSD KOENIG, MICHAEL	tion 617.0503, Florida Statute t and title if applicable (N D DIRECTORS DELETE	S. 13. 11 TITLE 1.2 NAMI 1.3 STRE 1.4 CITY 2.1 TITLE 2.2 NAMI 2.3 STRE 2.4 CITY 3.1 TITLE 3.2 NAME 3.3 NAME 3.4 NAME 3.4 NAME 3.4 NAME 3.5 NAME 3.6 NAME 3.7 NAME 3.	ET ADDRESS ST-ZIP ET ADDRESS - ST-ZIP	d when renstating)	DATE CERS AND DIRECT Char Char	nge Addition
SIGNATURE _ 12. TITLE NAME SIREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE VAME STREET ADDRESS STREET ADDRESS STREET ADDRESS	Signature, typed or printed name of registered agent OFFICERS AN PD KOENIG, PAUL 9000 SHERIDAN ST #130 PEMBROKE PINES FL VTD CORNFELD, JEFFREY 9000 SHERIDAN ST #130 PEMBROKE PINES FL VSD KOENIG, MICHAEL 9000 SHERIDAN ST #130	tion 617.0503, Florida Statute t and title if applicable (N D DIRECTORS DELETE	S. 13. 1.1 TITLE 1.2 NAMI 1.3 STRE 1.4 CITY 2.1 TITLE 2.2 NAME 2.3 STRE 2.4 CITY 3.1 TITLE 3.2 NAME 3.3 STREI 3.3 STREI 3.3 STREI 3.3 STREI 3.4 STREI 3.5 STREI	T ADDRESS T ADDRESS T ADDRESS T ADDRESS	d when renstating)	DATE CERS AND DIRECT Char Char	nge Addition
TATHINAR WITE SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed or printed name of registered agent OFFICERS AN PD KOENIG, PAUL 9000 SHERIDAN ST #130 PEMBROKE PINES FL VTD CORNFELD, JEFFREY 9000 SHERIDAN ST #130 PEMBROKE PINES FL VSD KOENIG, MICHAEL	tion 617.0503, Florida Statute tiand title if applicable (N D DIRECTORS DELETE DELETE	S. 13. 1.1 TITLE 1.2 NAMI 1.3 STRE 1.4 CITY 2.1 TITLE 2.2 NAMI 2.3 STRE 2.4 CITY 3.1 TITLE 3.2 NAMI 3.3 STREI 3.4 CITY 3.4 CITY 3.4 CITY 3.5 STREI 3.4 CITY	T ADDRESS T ADDRESS T ADDRESS T ADDRESS	d when renstating)	DATE CERS AND DIRECTAL Char Char Char	nge Addition Addition Addition
SIGNATURE _ 12. ITTLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed or printed name of registered agent OFFICERS AN PD KOENIG, PAUL 9000 SHERIDAN ST #130 PEMBROKE PINES FL VTD CORNFELD, JEFFREY 9000 SHERIDAN ST #130 PEMBROKE PINES FL VSD KOENIG, MICHAEL 9000 SHERIDAN ST #130	tion 617.0503, Florida Statute t and title if applicable (N D DIRECTORS DELETE	S	T ADDRESS ST-ZIP T ADDRESS ST-ZIP T ADDRESS ST-ZIP	d when renstating)	DATE CERS AND DIRECT Char Char	nge Addition Addition Addition
SIGNATURE _ 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed or printed name of registered agent OFFICERS AN PD KOENIG, PAUL 9000 SHERIDAN ST #130 PEMBROKE PINES FL VTD CORNFELD, JEFFREY 9000 SHERIDAN ST #130 PEMBROKE PINES FL VSD KOENIG, MICHAEL 9000 SHERIDAN ST #130	tion 617.0503, Florida Statute tiand title if applicable (N D DIRECTORS DELETE DELETE	S	T ADDRESS ST-ZIP T ADDRESS ST-ZIP T ADDRESS ST-ZIP	d when renstating)	DATE CERS AND DIRECTAL Char Char Char	nge Addition Addition age Addition
SIGNATURE _ TILE NAME SIREET ADDRESS STREET ADDRESS	Signature, typed or printed name of registered agent OFFICERS AN PD KOENIG, PAUL 9000 SHERIDAN ST #130 PEMBROKE PINES FL VTD CORNFELD, JEFFREY 9000 SHERIDAN ST #130 PEMBROKE PINES FL VSD KOENIG, MICHAEL 9000 SHERIDAN ST #130	tion 617.0503, Florida Statute tiand title if applicable (N D DIRECTORS DELETE DELETE	S. OTE: Registered Ag 13. 1.1 TITLE 1.2 NAM! 1.3 STRE 1.4 CITY 2.1 TITLE 2.2 NAM! 2.3 STREI 3.4 CITY 3.1 TITLE 3.2 NAM! 4.1 TITLE 4.2 NAM 4.3 STREI	T ADDRESS ST-ZIP T ADDRESS ST-ZIP T ADDRESS ST-ZIP T ADDRESS ST-ZIP	d when renstating)	DATE CERS AND DIRECTAL Char Char Char	nge Addition Addition Addition
SIGNATURE 12. ITTLE VAME STREET ADDRESS	Signature, typed or printed name of registered agent OFFICERS AN PD KOENIG, PAUL 9000 SHERIDAN ST #130 PEMBROKE PINES FL VTD CORNFELD, JEFFREY 9000 SHERIDAN ST #130 PEMBROKE PINES FL VSD KOENIG, MICHAEL 9000 SHERIDAN ST #130	tion 617.0503, Florida Statute tiand title if applicable (N D DIRECTORS DELETE DELETE	S	T ADDRESS ST-ZIP T ADDRESS ST-ZIP T ADDRESS ST-ZIP T ADDRESS ST-ZIP	d when renstating)	DATE CE RS AND DIRECTOR Char Char Char	age Addition Addition Addition Addition Addition
SIGNATURE 12. ITTLE IAME STREET ADDRESS STRY-ST-ZIP ITTLE	Signature, typed or printed name of registered agent OFFICERS AN PD KOENIG, PAUL 9000 SHERIDAN ST #130 PEMBROKE PINES FL VTD CORNFELD, JEFFREY 9000 SHERIDAN ST #130 PEMBROKE PINES FL VSD KOENIG, MICHAEL 9000 SHERIDAN ST #130	and title if applicable (N D DIRECTORS DELETE DELETE DELETE DELETE DELETE	S. OTE: Registered Ag 13. 1.1 TITLE 1.2 NAMI 1.3 STRE 1.4 CITY 2.1 TITLE 2.2 NAME 2.4 CITY 3.1 TITLE 3.2 NAME 3.3 STREI 4.1 CITY 4.1 TITLE 4.2 NAME 4.3 STREI 4.4 CITY 4.4 STREI 4.4 CITY	T ADDRESS ST-ZIP T ADDRESS ST-ZIP T ADDRESS ST-ZIP T ADDRESS ST-ZIP	d when renstating)	DATE CERS AND DIRECTAL Char Char Char	nge Addition Addition Addition Addition Addition
SIGNATURE 12. 11. ITTLE NAME STREET ADDRESS DITY-ST-ZIP TITLE NAME NAME NAME NAME NAME NAME NAME NAM	Signature, typed or printed name of registered agent OFFICERS AN PD KOENIG, PAUL 9000 SHERIDAN ST #130 PEMBROKE PINES FL VTD CORNFELD, JEFFREY 9000 SHERIDAN ST #130 PEMBROKE PINES FL VSD KOENIG, MICHAEL 9000 SHERIDAN ST #130	and title if applicable (N D DIRECTORS DELETE DELETE DELETE DELETE DELETE	S. OTE: Registered Ag 13. 1.1 TITLE 1.2 NAMI 1.3 STRE 1.4 CITY 2.1 TITLE 2.2 NAME 2.3 STREI 2.4 CITY 3.1 TITLE 3.2 NAME 3.3 STREI 4.1 TITLE 4.2 NAM 4.3 STREI 4.4 CITY 5.1 TITLE 5.2 NAME 5.2 NAME	T ADDRESS ST-ZIP T ADDRESS ST-ZIP T ADDRESS ST-ZIP T ADDRESS ST-ZIP	d when renstating)	DATE CE RS AND DIRECTOR Char Char Char	nge Addition Addition Addition Addition Addition
SIGNATURE 112. 117. 1	Signature, typed or printed name of registered agent OFFICERS AN PD KOENIG, PAUL 9000 SHERIDAN ST #130 PEMBROKE PINES FL VTD CORNFELD, JEFFREY 9000 SHERIDAN ST #130 PEMBROKE PINES FL VSD KOENIG, MICHAEL 9000 SHERIDAN ST #130	and title if applicable (N D DIRECTORS DELETE DELETE DELETE DELETE DELETE	S. OTE: Registered Ag 13. 1.1 TITLE 1.2 NAMI 1.3 STREI 1.4 CITY 2.1 TITLE 2.2 NAME 2.3 STREI 3.1 CITY 4.1 TITLE 4.2 NAM 4.3 STREI 4.4 CITY 5.1 TITLE 5.2 NAME 5.3 STREI 5.3 ST	T ADDRESS ST-ZIP	d when renstating)	DATE CE RS AND DIRECTOR Char Char Char	nge Addition Addition Addition Addition Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed or printed name of registered agent OFFICERS AN PD KOENIG, PAUL 9000 SHERIDAN ST #130 PEMBROKE PINES FL VTD CORNFELD, JEFFREY 9000 SHERIDAN ST #130 PEMBROKE PINES FL VSD KOENIG, MICHAEL 9000 SHERIDAN ST #130	and title if applicable (N D DIRECTORS DELETE DELETE DELETE DELETE DELETE	S. OTE: Registered Ag 13. 1.1 TITLE 1.2 NAMI 1.3 STRE 1.4 CITY 2.1 TITLE 2.2 NAME 2.3 STREI 2.4 CITY 3.1 TITLE 3.2 NAME 3.3 STREI 4.1 TITLE 4.2 NAM 4.3 STREI 4.4 CITY 5.1 TITLE 5.2 NAME 5.2 NAME	T ADDRESS ST-ZIP	d when renstating)	DATE CE RS AND DIRECTOR Char Char Char	nge Addition age Addition age Addition age Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Signature, typed or printed name of registered agent OFFICERS AN PD KOENIG, PAUL 9000 SHERIDAN ST #130 PEMBROKE PINES FL VTD CORNFELD, JEFFREY 9000 SHERIDAN ST #130 PEMBROKE PINES FL VSD KOENIG, MICHAEL 9000 SHERIDAN ST #130	and title if applicable (N D DIRECTORS DELETE DELETE DELETE DELETE DELETE DELETE	S. OTE: Registered Ag 13. 1.1 Title 1.2 NAM! 1.3 STRE! 1.4 CITY- 2.1 TITLE 2.2 NAM! 2.3 STRE! 2.4 CITY 3.1 TITLE 3.2 NAM! 3.3 STRE! 4.2 NAM! 4.3 STRE! 4.4 CITY- 5.1 TITLE 5.2 NAME 5.3 STRE! 5.4 CITY-	T ADDRESS ST-ZIP T ADDRESS ST-ZIP T ADDRESS ST-ZIP T ADDRESS ST-ZIP I ADDRESS ST-ZIP	d when renstating)	CFRS AND DIRECTORS Char	nge Addition age Addition age Addition age Addition
SIGNATURE	Signature, typed or printed name of registered agent OFFICERS AN PD KOENIG, PAUL 9000 SHERIDAN ST #130 PEMBROKE PINES FL VTD CORNFELD, JEFFREY 9000 SHERIDAN ST #130 PEMBROKE PINES FL VSD KOENIG, MICHAEL 9000 SHERIDAN ST #130	and title if applicable (N D DIRECTORS DELETE DELETE DELETE DELETE DELETE DELETE	S. OTE: Registered Ag 13. 1.1 TITLE 1.2 NAMI 1.3 STRE 1.4 CITY 2.1 TITLE 2.2 NAME 2.3 STREE 3.4 CITY 3.1 TITLE 3.2 NAME 3.3 STREE 4.4 CITY 5.1 TITLE 5.2 NAME 5.3 STREE 5.4 CITY 6.1 TITLE 6.2 NAME 6.2 NAME 6.3 NAME 6.3 NAME 6.3 NAME 6.3 NAME 6.3 NAME 6.4 CITY 6.1 TITLE 6.2 NAME 6.3 NAME	T ADDRESS ST-ZIP T ADDRESS ST-ZIP T ADDRESS ST-ZIP T ADDRESS ST-ZIP I ADDRESS ST-ZIP	d when renstating)	CFRS AND DIRECTORS Char	nge Addition age Addition age Addition age Addition

appears in Block 12 or Block

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/14/96 (954) 436-9000 Daytine Phone #