(561) 997-8661

Daytime Phone #

4/24/01

Date

2001 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE: ≤

| | <u> </u> | | | • | • | • | | | | | 9 |
|--|--|--|------------------------|----------------------|--|--|---|--|--------------------------------------|---|-----------------|
| DOCUMENT # 856211 1. Entity Name | | | | | | | FIL | ED | Co. | | |
| ALTMAN | N DEVELOPMENT CORPORATION | ON | | | | | 1 APR 27 | PM 4: 3 | 6 | | |
| Principal Place of Business | | Mailing Address | | | | SECRETARY OF STATE TALLAHASSEE, FLORIDA | | | | | |
| 2201 CORP BLVD NW SUITE 200 BOCA RATON FL 33431 US | | 2201 CORP BLVD NW SUITE 200 BOCA RATON FL 33431 US | | | | | | | | | |
| 2. Principal Place of Business | | 3. Mailing Address | | | | | | | | | |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | | | | DO NOT WRI | TE IN THIS SPA | CE | ! | | |
| City & State | | City & State | | 4 | . FEI Number | 38-203628 | 3 | | oplied For ot Applicable |] | |
| Zip | Country | Zip | | ntry | 5 | . Certificate of | Status Desired | | .75 Add | ditional | 1 |
| | 6. Name and Address of Current Re | gistered Agent | | | 7 | . Name and Ad | dress of New F | . | | | _ |
| A I TE | UAN IOTI I | | | Name | | | | | | | |
| 2201 | Man, Joel L. I Corp Blyd., N.W. Suite 200 IA Raton Fl 33431 | | | Street A | et Address (P.O. Box Number is Not Acceptable) | | | |] | | |
| | | | | City | | | | FL | Zip Cod | e | - |
| 8. The above | e named entity submits this statement for the | ne purpose of changing its re | egister | ed office o | r registered | agent, or both, | n the State of Flo | orida. | | | 1 |
| SIGNATURE | Signature, typed or printed name of registered agent and | title if applicable. (NOT | Registere | d Agent signat | ure required whe | n reinstating) | | DATE | | <u>_</u> | |
| 9. This corpo | oration is eligible to satisfy its Intangible | FILE NOW | | | | | | | | | 1 |
| Tax filing requirement and elects to do so. (See criteria on back) | | After MAY 1, 20 11 F Make Check Payal ie to | | Fee will be \$550.00 | | te 10. Election Campaign Financing \$5.00 May Be Added to Fees Added to Fees | | | | | |
| 11. | OFFICERS AND DIF | | 12. | | , , | | ANGES TO OFF | | | |]_ |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | PVD ALTMAN, JOEL L. 2201 CORP BLVD., N.W. SUITE 20 BOCA RATON FL 33431 | □ Delete | | | | 30 | 00004 -05/2 **** | 13244 9/0101(158.75 | Change 3 3 111 ****1 | □ Addition 002 58.75 | CR2E034 (10/00) |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | SD ROBERTS, JEFFREY 2201 CORP BLVD., N.W. 200 BOCA RATON FL 33431 | □ Delete | | | į. | K | | | Change | Addition | CR2 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | VT MERRILL, DAN H 2201 CORP BLVD., NW SUITE 200 BOCA RATON FL 33431 | ⊠ Delete | TITLE NAMI STRE | | 2201 C | , Joel L orporate aton, FL | Blvd., | | Change 200 | ⊠ Addilion | - |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | ☐ Delete | | | | | | | Change | ☐ Addition | |
| TITLE NAME STREET DDRESS | | ☐ Delete | | E Et address | | | | | Change | Addition | |
| CITY-ST. ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP | | ☐ Delete | TITLE NAME STREE | | | <u>.</u> | | | Change | Addition | |
| | certify that the information supplied with this on this report or supplier protested protested in the received primate and the protested of the second protests, with the second protests, with the second protests, with the second protests and the second protests. | s filing does not qualify for the and accurate and that hy red to execute this report as all price tiles empowered | ne exer | nption stat | ed in Section ave the sam- pter 607, Flo | n 119.07(3)(i), F e legal effect as orida Statutes; a | lorida Statutes. If made under ond and that my name | further certify the path; that I am are appears in Blo | nat the in n officer ick 11 or | formation or director Block 12 if | |

PED OR PRINTED NAME OF SIGNING OFFICER OF DIRECTOR