

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Northam
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 200434

(9)

1. Corporation Name

CORAL RIDGE INVESTMENT CORP.

Principal Place of Business

3300 UNIVERSITY DRIVE
CORAL SPRINGS FL 33065

Mailing Address

3300 UNIVERSITY DRIVE
CORAL SPRINGS FL 33065

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

03/04/1957

3a. Date of Last Report

01/20/1994

4. FEI Number

59-0812132

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 or intangible tax under S. 199.032,
Florida Statutes

☒ Yes ☐ No

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

81 Name

GORDON, K.Y.

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85

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 provisions of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

3/10/95

12. OFFICERS AND DIRECTORS

TITLE

V

NAME

VANCE, D. L.

STREET ADDRESS

3300 UNIVERSITY DR.
CORAL SPRINGS FL

CITY - ST - ZIP

TITLE

RD

NAME

RAMSEY, R. W.

STREET ADDRESS

3300 UNIVERSITY DR.
CORAL SPRINGS FL

CITY - ST - ZIP

TITLE

CAS

NAME

~~CAMPBELL, L. R.~~

STREET ADDRESS

3300 UNIVERSITY DR.
CORAL SPRINGS FL

CITY - ST - ZIP

TITLE

TD

NAME

~~BAKER, R. W.~~

STREET ADDRESS

~~6 GATEWAY CENTER
PITTSBURGH PA~~

CITY - ST - ZIP

TITLE

ED

NAME

KOSTE, B. R.

STREET ADDRESS

801 LAUREL OAK DR
CORAL SPRINGS FL

CITY - ST - ZIP

TITLE

S

NAME

MCGOWAN, J. P.

STREET ADDRESS

3300 UNIVERSITY DR.
CORAL SPRINGS FL

CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

2.1 TITLE

☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3.1 TITLE

Controller/AS
MUCCI, M.E.

☒ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE

FAUST, R.E.
801 Laurel Oak Drive
Naples, FL

☒ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE

C

☒ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE

☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 of changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

R. W. Ramsey, President

3/10/95

Signature / Date

ANGELO, P. J.
3300 UNIVERSITY DRIVE
CORAL SPRINGS, FL

AS