

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

PROFIT CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # 277791 (0)
1. Corporation Name
GOODLAND, INC.



Principal Place of Business: **P.O. BOX 248 HALLANDALE FL 33008**
Mailing Address: **P.O. BOX 248 HALLANDALE FL 33008**

3. Date Incorporated or Qualified: **01/23/1964**
3a. Date of Last Report: **04/11/1995**

2. Principal Place of Business (21) Suite, Apt. #, etc. (22) City & State (23) Zip (24) Country (25)
2a. Mailing Address (26) Suite, Apt. #, etc. (27) City & State (28) Zip (29) Country (30)

4. FEI Number: **59-1090152**
Applied For: Not Applicable:
5. Certificate of Status Desired: **\$8.75 Additional Fee Required**
6. Election Campaign Financing Trust Fund Contribution: **\$5.00 May Be Added to Fees**
8. This corporation has liability for intangible tax under s 199.032, Florida Statutes: Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**SCHWIND GEORGE
500 AUSTRALIAN AVENUE, S.
SUITE 600
WEST PALM BEACH FL 33401**

81 Name
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 obligations 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)

DATE

12. OFFICERS AND DIRECTORS	
TITLE	PD <input type="checkbox"/> DELETE
NAME	CURCIE, NADINE
STREET ADDRESS	1918 HARRISON STREET, SUITE 114
CITY - ST - ZIP	HOLLYWOOD FL
TITLE	SD <input type="checkbox"/> DELETE
NAME	MASHAMESH, PATSEY E
STREET ADDRESS	1918 HARRISON ST. #114
CITY - ST - ZIP	HOLLYWOOD FL
TITLE	VPD <input type="checkbox"/> DELETE
NAME	CURCIE, JOSEPH E
STREET ADDRESS	676 PALM COURT
CITY - ST - ZIP	GOODLAND FL
TITLE	TD <input type="checkbox"/> DELETE
NAME	CURCIE, ROSE MARY
STREET ADDRESS	1970 SOUTH PARK ROAD
CITY - ST - ZIP	PEMBROKE PARK FL
TITLE	D <input checked="" type="checkbox"/> DELETE
NAME	MICHAEL P RIZZO
STREET ADDRESS	1093 S W 156 TERRACE
CITY - ST - ZIP	PEMBROKE PINES FL
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	VPD Curcie, Rose Mary
4.3 STREET ADDRESS	1970 South Park Road
4.4 CITY - ST - ZIP	Pembroke Park, Fl. 33009
5.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
5.2 NAME	TD Hill, Michael W.
5.3 STREET ADDRESS	2000 PGA Boulevard #3230
5.4 CITY - ST - ZIP	Palm BeachGardens, Fl. 33408
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> 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 119.07(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 if changed, or on an attachment with an address.

SIGNATURE: *Nadine Curcie* President 2-8-96 1-954-923-6484
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (12/95)