

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # 312563 (0)

1. Corporation Name

CORAL RIDGE PROPERTIES, INC.



Principal Place of Business

3300 UNIVERSITY DR.
CORAL SPRINGS FL 33065

Mailing Address

3300 UNIVERSITY DR.
CORAL SPRINGS FL 33065

3. Date Incorporated or Qualified

01/11/1967

3a. Date of Last Report

03/23/1995

4. FEI Number

25-1184789

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. 190.032,
Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

g. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

GORDON, K.Y.
C/O CORAL RIDGE PROPERTIES
3300 UNIVERSITY DRIVE
CORAL SPRINGS FL 33065

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 change of agent, Section 607.0505, Florida Statutes.

SIGNATURE

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

Kenneth Y. Gordon

4/22/96

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	☐ DELETE
PD	RAMSEY, R W	3300 UNIVERSITY DR	CORAL SPRINGS, FL 00000	☐
C	KOSTE, B. R.	801 LAUREL OAK DR	NAPLES FL	☒
S	MCGOWAN, J. P.	3300 UNIVERSITY DR	CORAL SPRINGS, FL 00000	☐
CAS	MUCCI, M.E.	3300 UNIVERSITY DR	CORAL SPRINGS, FL 00000	☒
V	DILLION, R.C.	3300 UNIVERSITY DR	CORAL SPRINGS, FL 00000	☐
TD	FAUST, R.E. W	801 LAUREL OAK AVE	NAPLES FL	☒

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY - ST - ZIP	☐ Change ☐ Addition
PC	RAMSEY, R.W.	3300 University Drive	Coral Springs, FL 33065	☒
2.1 TITLE	2.2 NAME	2.3 STREET ADDRESS	2.4 CITY - ST - ZIP	☐ Change ☒ Addition
CONTROLLER/AS	DISTEFANO, P. L.	3300 University Drive	Coral Springs, FL 33065	☒
3.1 TITLE	3.2 NAME	3.3 STREET ADDRESS	3.4 CITY - ST - ZIP	☐ Change ☒ Addition
DS	MCGOWAN, J. P.	3300 University Drive	Coral Springs, FL 33065	☒
4.1 TITLE	4.2 NAME	4.3 STREET ADDRESS	4.4 CITY - ST - ZIP	☐ Change ☒ Addition
T	CARLSON, A. J.	801 Laurel Oak Drive	Naples, FL 33963	☒
5.1 TITLE	5.2 NAME	5.3 STREET ADDRESS	5.4 CITY - ST - ZIP	☐ Change ☐ Addition
6.1 TITLE	6.2 NAME	6.3 STREET ADDRESS	6.4 CITY - ST - ZIP	☐ Change ☐ Addition

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AB

4-24-96

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 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 registered agent 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 as an attachment with an address.

SIGNATURE:

James P. McGowan
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

James P. McGowan, Secretary

4/22/96

Date:

Daytime Phone:

CR2E034 (12/95)