FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 312563

(0)

CORAL RIDGE PROPERTIES, INC.

Mailing Address

_	FILEL)
Apr 21	1997	8:00am
Secre	tary o	of State

	BIIEB # # # # # # # # # #	888 01 919 11 4881

CORAL SPRING	TY DR. IS FL 33065	CORAL SPRINGS FL 3306	5-6309				
					3. Date Incorporated or Qualified 01/11/1967	3a. Date of Last R	oport
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number		plied For
21		26			25-1184789	No	ot Applicable
Sulte, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75	Additional
22		5. Certificate of Status Desired	Fee Re	equired			
. City & State	0	City & State			6. Election Campaign Financing	\$5.00	May Be
23		28	,		Trust Fund Contribution	Added 1	to Fees
Zip	Country	Zip	Count	ry	8. This corporation has liability for intangible tax under s. 199.032,		
24	25	29	30]			Yes No	
 	g, Name and Address of Curren	t Registered Agent		1 Name	10. Name and Address of New Reg	Jistered Agent	
	RDON, K.Y. D		0	Name			
	CORAL RIDGE PROPERTIES		8	2 Street A	ddress (P.O. Box Number is Not Acceptab	le)	
	UNIVERSITY DRIVE		-				
COR	IAL SPRINGS FL 33065		8	3			
			8	4 City		FL 85 Zip (Code
11. Pursuant	to the provisions of Sections 607.050	2 and 607.1508, Florida Statu	tes, the abo	ve-named c	orporation submits this statement for the p	urpose of changing it	s registered
office or n	egistered agent, or both, in the State im familiar with, and accept the obliga	of Florida. Such change was ations of, Section 607.0505, Fl	authorized orida Statut	by the corpo es.	oration's board of directors. I hereby accep	t the appointment as	registered
SIGNATURE	(no chang	re)	Kenr	eth Y.	Gordon	4/15/97	
SIGNATURE	Signature, typed or printed name of registered age	int and title if applicable. (NO	I (: Registered A	gent signature re	equired when reinstating)	ENATE	
12.	OFFICE:RS ANI		13.		ADDITIONS/CHANGES TO OFFIC		
TITLE	PC	DELETE	1.1 1111.6		P/C	☐ Change	Addition
NAME	RAMSEY, R W		1.2 NAM	·	STREIB, LARRY W.		
STREET ADDRESS	3300 UNIVERSITY DR			E1 ADDRESS	3300 University Drive		
CITY-SY-ZIP	CORAL SPRINGS FL 33065	DELETE		- \$1 - ZIP	Coral Springs, FL 330	6.5 Change	X Addition
TITLE	CAS	€ Decese	2.1 TITLE		S/D	Change	LA MODITION
NAME	DISTEFANO, P L		2.2 NAM		HARRISON, THOMAS J.	•	
STREET ADDRESS	3300 UNIVERSITY DRIVE			E1 ADDRESS	3300 University Drive	~ =	
CITY-ST-ZIP	CORAL SPRINGS FL 33065 DS	DELETE	2. 4 DHY 3.1 THE	-ST-ZIP	Coral Springs, FL 330	Change	Addition
	MCGOWAN, J. P.	L'S DECENE	3.2 NAM			C) ontarige	
NAME OXOCET ADDRESS	3300 UNIVERSITY DR			ET ADDRESS			
STREET ADDRESS	CORAL SPRINGS FL 33065						
CITY-ST-ZIP	T	DELETE	4.1 TITLE	'- S1 - Z(P		Change	Addition
NAME	CARLSON, A J	C 222.12	4 2 NAN				
STREET ADDRESS	801 LAUREL OAK DRIVE		1	ET ADDRESS			
CITY-ST-ZIP	NAPLES FL 33963		4.4 C(1)			•	
TITLE	V	DELETE	51 TITLE			Change	Addition
NAME	DILLION, R.C.		5.2 NAM			•	
STREET ADDRESS	3300 UNIVERSITY DR		1	ET ADDRESS			
CITY-ST-ZIP	CORAL SPRINGS, FL 00000		5.4 C/TY				
TITLE		DELETE	61 1ITU			☐ Change	Addition
NAME	:		62 NAM	l l		_	
STREET ADDRESS				ET ADDRESS			
CITY-ST-ZIP	d+			-SI-ZIP			
VIII-01-611		-1 - 21 - 41	04011		stad in Costion 110 07/2V/// Florida Clalutar	. I feether a sett Abot	4b

I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 trusted 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.