

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

FILED

Feb 02 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 312563 (0)
1. Corporation Name
CORAL RIDGE PROPERTIES, INC.

Principal Place of Business Mailing Address
3300 UNIVERSITY DR. 3300 UNIVERSITY DR.
CORAL SPRINGS FL 33065 CORAL SPRINGS FL 33065



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 01/11/1967	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. PEI Number 25-1184789	
22	City & State	27	City & State	5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
23	Zip	28	Zip	6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	
24	Country	29	Country	8. (this corporation owes or has paid the current year intangible Personal Property Tax due June 30. ☒ Yes ☐ No	

9. Name and Address of Current Registered Agent

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

10. Name and Address of New Registered Agent

81 Name Maryann Nance
82 Street Address (P.O. Box Number is Not Acceptable)
c/o Coral Ridge Properties, Inc.
83 3300 University Drive 9th FL
84 City Coral Springs FL 85 Zip Code 33065

11. Pursuant to the provisions of Sections 607.0502 and 607.1504, 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 Maryann Nance
(Signature typed or printed name of registered agent must also be filed if applicable)

1/22/98
(Date)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PC ☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	STREIB, LARRY W.	1.2 NAME	
STREET ADDRESS	3300 UNIVERSITY DRIVE	1.3 STREET ADDRESS	
CITY-ST-ZIP	CORAL SPRINGS FL	1.4 CITY-ST-ZIP	
TITLE	CAS ☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	DISTEFANO, P L	2.2 NAME	
STREET ADDRESS	3300 UNIVERSITY DRIVE	2.3 STREET ADDRESS	
CITY-ST-ZIP	CORAL SPRINGS FL 33065	2.4 CITY-ST-ZIP	
TITLE	SD ☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME	HARRISON, THOMAS J.	3.2 NAME	
STREET ADDRESS	3300 UNIVERSITY DRIVE	3.3 STREET ADDRESS	
CITY-ST-ZIP	CORAL SPRINGS FL	3.4 CITY-ST-ZIP	
TITLE	T ☒ DELETE	4.1 TITLE	☒ Change ☐ Addition
NAME	CARLSON, A J	4.2 NAME	
STREET ADDRESS	801 LAUREL OAK DRIVE	4.3 STREET ADDRESS	
CITY-ST-ZIP	NAPLES FL 33963	4.4 CITY-ST-ZIP	
TITLE	V ☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME	DILLION, R.C.	5.2 NAME	
STREET ADDRESS	3300 UNIVERSITY DR	5.3 STREET ADDRESS	
CITY-ST-ZIP	CORAL SPRINGS, FL 00000	5.4 CITY-ST-ZIP	
TITLE	☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), 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: Rachel C. Dillon

CR2E034 (10/97)