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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # 681040

DALCON OF BOCA TOWN CENTER I, INC.

|  |   | •  |   |  |  |  |                                      |   |
|--|---|--|---|--|--|--|--------------------------------------|---|
| Principal Place  | e of Business   | Mailing Address  | -   |  | -  | ALATİ ALARI ALATI SKATL                    | MIREL DIDIL LODE                     |   |
| 221 TOWN CENTER         221 TOWN CENTER           BOCA RATON FL 33431-7259         BOCA RATON FL 33431-7259  |   |  |   |  | DO NOT WRITE IN  | THIS SPACE                                 |                                      |   |
|  |   | •  |   |  | 3. Date Incorporated or Qualifed   | TINO OF MOL                                | •                                    |   |
|  | •   |  |   |  | 08/05/1980   |  |                                      |   |
| 2. Principal P   | lace of Business  | 2a. Mailing Address  |   |  | 4. FEI Number  | T A  | pplied For                           | 1                                       |
| 21   |   | 26   |   |  | 59-2022485   | N  | ot Applicable                        | 1                                       |
| Suite, Apt.  | #, etc.   | Suite, Apt. #, etc.  |   |  | 5. Certificate of Status Desired   |  | Additional<br>equired                | ř,                                      |
| City & State City & State  |   |  |   | 6. Election Campaign Financing \$5.00                                      |  | May Re                                     |                                      |   |
| 23   |   | 28   |   |  | Trust Fund Contribution  | · Adyled                                   |                                      |   |
| Zip  | Country 25  | Zip  | Country   |  | This corporation owes the current ye     Personal Property Tax.                            | ar Intangible                              | □No                                  |   |
| 271  | 9. Name and Address of Curren   | _ !"-"   <del> </del>  | 1.  |  | 10. Name and Address of New Regist   | ered Agent                                 |                                      |   |
|  | 1   | <u> </u>   | 81  | Name   |  | .=   |                                      |   |
| CON<br>0/1/1130  | IRAD, DENNIS<br>00 SHADY LANE   | 4 MC   | 82  | Street Addre   | ss (P.O. Box Number is Not Acceptable)   | •  |                                      |   |
| BOC  | CA RATON, FL  |  | 83  |  | 「神神の神の神」では、日本の日本の神の神の神の神の神の神の神の神の神の神の神の神の神の神の神の神の神の  |  |                                      |   |
| PLAI   | NTATION FL 33325  |  |   |  | 15台灣電腦電腦網  | Mist eien stell ers                        |                                      |   |
|  |   |  | 84  | City   |  | FL 85 Zip                                  | Code                                 |   |
| 11. Pursuant office or r   | to the provisions of Sections 607.050<br>registered agent, or both, in the State  | 2 and 607.1508, Florida Statutes<br>of Florida. Such change was aut                                  | s, the above-   | named corpo  | ration submits this statement for the purpo<br>n's board of directors. I hereby accept the | se of changing its<br>appointment as n     | s registered<br>egistered            |   |
| agent. I a<br>SIGNATURE  | im familiar with, and accept the obligat  | tions of, Section 607.0505, Florid   | da Statutes.  | •  |  |  | ·                                    |   |
| agent. I a   | m familiar with, and accept the obligat   | tions of, Section 607.0505, Florio   | da Statutes.  | •  | when reinstating) $\gamma^{1} = \sum_{i=1}^{n} \Omega_{i} \gamma^{i}$ DA                   | TE .                                       | ·                                    | 6                                       |
| agent. I a<br>SIGNATURE<br>12.   | m familiar with, and accept the obligat Signature, typed or printed name of registered agen OFFICERS AN   | tions of, Section 607.0505, Florid tiand title if applicable. (NOTE: F D DIRECTORS                   | Registered Agent s  | •  | when reinstating); (1994) DA  ADDITIONS/CHANGES TO OFFICER                                 | TE .                                       | ·                                    | 44/000                                  |
| agent. I a SIGNATURE  12.  TITLE   | im familiar with, and accept the obligat Signature, typed or printed name of registered agen OFFICERS AN  | tions of, Section 607.0505, Florio   | Registered Agent s  1.3 TITLE   | •  | when reinstating) $\gamma^{1} = \sum_{i=1}^{n} \Omega_{i} \gamma^{i}$ DA                   | TE<br>RS AND DIRECT                        | ORS IN 12                            | 74.744(200)                             |
| agent. I a SIGNATURE  12.  TITLE  NAME   | signature, typed or printed name of registered agen OFFICERS AN PSD CONRAD, DENNIS  | tions of, Section 607.0505, Florid tiand title if applicable. (NOTE: F D DIRECTORS                   | Registered Agent s  13.  1.1 TITLE  1.2 NAME  | signature required   | when reinstating); (1994) DA  ADDITIONS/CHANGES TO OFFICER                                 | TE<br>RS AND DIRECT                        | ORS IN 12                            | 10011/44000                             |
| agent. I a SIGNATURE  12. TITLE NAME STREET ADDRESS  | Signature, typed or printed name of registered agen OFFICERS AN PSD CONRAD, DENNIS 11300 SHADY LANE   | tions of, Section 607.0505, Florid tiand title if applicable. (NOTE: F D DIRECTORS                   | Registered Agent s  13.  1.1 TITLE  1.2 NAME  1.3 STREET A  | signature required   | when reinstating); (1994) DA  ADDITIONS/CHANGES TO OFFICER                                 | TE<br>RS AND DIRECT                        | ORS IN 12                            | 0000017440000                           |
| agent. I a SIGNATURE  12.  TITLE  NAME   | signature, typed or printed name of registered agen OFFICERS AN PSD CONRAD, DENNIS  | tions of, Section 607.0505, Florid tiand title if applicable. (NOTE: F D DIRECTORS                   | Registered Agent s  13.  1.1 TITLE  1.2 NAME  | signature required   | when reinstating); (1994) DA  ADDITIONS/CHANGES TO OFFICER                                 | TE<br>RS AND DIRECT                        | ORS IN 12                            | 000000000000000000000000000000000000000 |
| agent. I a SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP  | Signature, typed or printed name of registered agen OFFICERS AN PSD CONRAD, DENNIS 11300 SHADY LANE   | tions of, Section 607.0505, Florid t and title if applicable. (NOTE: F  D DIRECTORS  DELETE          | 13. 1.3 TITLE 1.2 NAME 1.3 STREET A 1.4 CITY-ST-  | signature required   | when reinstating); (1994) DA  ADDITIONS/CHANGES TO OFFICER                                 | RS AND DIRECTI                             | ORS IN 12                            | (00)747/100/1000                        |
| agent. I a SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE  | Signature, typed or printed name of registered agen OFFICERS AN PSD CONRAD, DENNIS 11300 SHADY LANE PLANTATION FL   | tions of, Section 607.0505, Florid t and title if applicable. (NOTE: F  D DIRECTORS  DELETE          | tegistered Agent s  13. 1.1 TITLE 12 NAME 1.3 STREET A 1.4 CITY-ST- 2.1 TITLE   | ADDRESS  | when reinstating); (1994) DA  ADDITIONS/CHANGES TO OFFICER                                 | RS AND DIRECTI                             | ORS IN 12                            | 0000007(44(00))                         |
| Agent. I a SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME   | Signature, typed or printed name of registered agen OFFICERS AN PSD CONRAD, DENNIS 11300 SHADY LANE PLANTATION FL V CONRAD, JEAN  | tions of, Section 607.0505, Florid t and title if applicable. (NOTE: F  D DIRECTORS  DELETE          | Registered Agent s  13. 1.1 TITLE 12 NAME 1.3 STREET A 1.4 CITY-ST- 2.1 TITLE 22 NAME   | ADDRESS ADDRESS  | when reinstating); (1994) DA  ADDITIONS/CHANGES TO OFFICER                                 | RS AND DIRECTI                             | ORS IN 12                            | (00)747,744,000                         |
| agent. I a SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS  | Signature, typed or printed name of registered agen OFFICERS AN PSD CONRAD, DENNIS 11300 SHADY LANE PLANTATION FL V CONRAD, JEAN 11300 SHADY LANE   | tions of, Section 607.0505, Florid t and title if applicable. (NOTE: F  D DIRECTORS  DELETE          | Registered Agent s  13. 1.1 TITLE 12 NAME 1.3 STREET A 1.4 CITY-ST- 2.1 TITLE 22 NAME 2.3 STREET A  | ADDRESS ADDRESS  | when reinstating); (1994) DA  ADDITIONS/CHANGES TO OFFICER                                 | RS AND DIRECTI                             | ORS IN 12                            | (00)747,747,000                         |
| agent. I a SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP  | Signature, typed or printed name of registered agen OFFICERS AN PSD CONRAD, DENNIS 11300 SHADY LANE PLANTATION FL V CONRAD, JEAN 11300 SHADY LANE PLANTATION FL V CONRAD, JEAN 11300 SHADY LANE PLANTATION FL V D'ALESSANDRO, ROSEMARIE | tions of, Section 607.0505, Florid t and title if applicable. (NOTE: F  D DIRECTORS  DELETE  DELETE  | Registered Agent s  13. 1.1 TITLE 12 NAME 1.3 STREET A 1.4 CITY-ST- 2.1 TITLE 22 NAME 2.3 STREET A 2.4 CITY-ST-   | ADDRESS ADDRESS  | when reinstating); (1994) DA  ADDITIONS/CHANGES TO OFFICER                                 | RS AND DIRECTOR Change                     | ORS IN 12 Addition                   | (00)(44), 7,000,000                     |
| AGENTURE  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  TITLE  | PSD CONRAD, DENNIS 11300 SHADY LANE PLANTATION FL V CONRAD, JEAN 11300 SHADY LANE PLANTATION FL V CONRAD, JEAN 11300 SHADY LANE PLANTATION FL V CONRAD, JEAN 11300 SHADY LANE PLANTATION FL V D'ALESSANDRO, ROSEMARIE 639 PAWNEE LANE   | tions of, Section 607.0505, Florid t and title if applicable. (NOTE: F  D DIRECTORS  DELETE  DELETE  | 13. TITLE 12 NAME 13 STREET A 14 CITY-ST- 21 TITLE 22 NAME 23 STREET A 2.4 CITY-ST- 3.1 TITLE   | ADDRESS ADDRESS -ZIP   | when reinstating); (1994) DA  ADDITIONS/CHANGES TO OFFICER                                 | RS AND DIRECTOR Change                     | ORS IN 12 Addition                   | (00)747,7500 TO CO                      |
| Agent. I a SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME  | Signature, typed or printed name of registered agen OFFICERS AN PSD CONRAD, DENNIS 11300 SHADY LANE PLANTATION FL V CONRAD, JEAN 11300 SHADY LANE PLANTATION FL V CONRAD, JEAN 11300 SHADY LANE PLANTATION FL V D'ALESSANDRO, ROSEMARIE | tions of, Section 607.0505, Florid  I and title if applicable. (NOTE: F  D DIRECTORS  DELETE  DELETE | 13. TITLE 12 NAME 13 STREET A 14 CITY-ST- 21 TITLE 22 NAME 23 STREET A 2.4 CITY-ST- 3.1 TITLE 32 NAME 33 STREET A 3.4 CITY-ST-  | ADDRESS ADDRESS - ZIP ADDRESS  | when reinstating);  DA  ADDITIONS/CHANGES TO OFFICEF                                       | RS AND DIRECTION Change                    | ORS IN 12 Addition Addition          | (00)(44)(1000)                          |
| Agent. I a SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS STREET ADDRESS  | PSD CONRAD, DENNIS 11300 SHADY LANE PLANTATION FL V CONRAD, JEAN 11300 SHADY LANE PLANTATION FL V CONRAD, JEAN 11300 SHADY LANE PLANTATION FL V CONRAD, JEAN 11300 SHADY LANE PLANTATION FL V D'ALESSANDRO, ROSEMARIE 639 PAWNEE LANE   | tions of, Section 607.0505, Florid t and title if applicable. (NOTE: F  D DIRECTORS  DELETE  DELETE  | Table 1.3 STREET A 1.4 CITY-ST- 2.1 TITLE 2.2 NAME 2.3 STREET A 2.4 CITY-ST- 3.1 TITLE 3.2 NAME 3.3 STREET A 4.1 TITLE                                    | ADDRESS ADDRESS - ZIP ADDRESS  | when reinstating);  DA  ADDITIONS/CHANGES TO OFFICEF                                       | RS AND DIRECTOR Change                     | ORS IN 12 Addition Addition          | (00)(747), 1,000,000                    |
| AGENTURE  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  NAME  NAME  NAME  NAME   | Signature, typed or printed name of registered agen OFFICERS AN PSD CONRAD, DENNIS 11300 SHADY LANE PLANTATION FL V CONRAD, JEAN 11300 SHADY LANE PLANTATION FL V D'ALESSANDRO, ROSEMARIE 639 PAWNEE LANE FRANKLIN LAKES NJ             | tions of, Section 607.0505, Florid  I and title if applicable. (NOTE: F  D DIRECTORS  DELETE  DELETE | Registered Agent s  13. 1.1 TITLE 1.2 NAME 1.3 STREET A 1.4 CITY-ST- 2.1 TITLE 2.2 NAME 2.3 STREET A 2.4 CITY-ST- 3.1 TITLE 3.2 NAME 3.3 STREET A 3.4 CITY-ST- 4.1 TITLE 4.2 NAME   | ADDRESS -ZIP ADDRESS -ZIP -ZIP   | when reinstating);  DA  ADDITIONS/CHANGES TO OFFICEF                                       | RS AND DIRECTION Change                    | ORS IN 12 Addition Addition          | (00)(14) (10000000                      |
| AGENTURE  12.  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS                                 | Signature, typed or printed name of registered agen OFFICERS AN PSD CONRAD, DENNIS 11300 SHADY LANE PLANTATION FL V CONRAD, JEAN 11300 SHADY LANE PLANTATION FL V D'ALESSANDRO, ROSEMARIE 639 PAWNEE LANE FRANKLIN LAKES NJ             | tions of, Section 607.0505, Florid  I and title if applicable. (NOTE: F  D DIRECTORS  DELETE  DELETE | Registered Agent s  13. 1.1 TITLE 12 NAME 1.3 STREET A 1.4 CITY-ST- 2.1 TITLE 22 NAME 2.3 STREET A 2.4 CITY-ST- 3.1 TITLE 3.2 NAME 3.3 STREET A 3.4 CITY-ST- 4.1 TITLE 4.2 NAME 4.3 STREET A                                    | ADDRESS -ZIP -ADDRESS -ZIP -ADDRESS -ZIP -ADDRESS -ZIP -ADDRESS            | when reinstating);  DA  ADDITIONS/CHANGES TO OFFICEF                                       | RS AND DIRECTION Change                    | ORS IN 12 Addition Addition          | (00)777,700000                          |
| AGENTURE  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  CITY-ST-ZIP  CITY-ST-ZIP  CITY-ST-ZIP  CITY-ST-ZIP  STREET ADDRESS  CITY-ST-ZIP | Signature, typed or printed name of registered agen OFFICERS AN PSD CONRAD, DENNIS 11300 SHADY LANE PLANTATION FL V CONRAD, JEAN 11300 SHADY LANE PLANTATION FL V D'ALESSANDRO, ROSEMARIE 639 PAWNEE LANE FRANKLIN LAKES NJ             | i and title if applicable. (NOTE: FD DIRECTORS DELETE  DELETE  DELETE  DELETE                        | Registered Agent s  13. 1.1 TITLE 12 NAME 1.3 STREET A 1.4 CITY-ST- 2.1 TITLE 22 NAME 2.3 STREET A 2.4 CITY-ST- 3.1 TITLE 32 NAME 3.3 STREET A 3.4 CITY-ST- 4.1 TITLE 4.2 NAME 4.3 STREET A 4.4 CITY-ST- 4.4 CITY-ST- 4.5 TITLE | ADDRESS -ZIP -ADDRESS -ZIP -ADDRESS -ZIP -ADDRESS -ZIP -ADDRESS            | when reinstating);  DA  ADDITIONS/CHANGES TO OFFICEF                                       | TE  SS AND DIRECTI  Change  Change  Change | ORS IN 12 Addition Addition Addition | (00)(44)(100)                           |
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| AGENTURE  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  NAME  NAME  NAME  NAME  NAME                                       | Signature, typed or printed name of registered agen OFFICERS AN PSD CONRAD, DENNIS 11300 SHADY LANE PLANTATION FL V CONRAD, JEAN 11300 SHADY LANE PLANTATION FL V D'ALESSANDRO, ROSEMARIE 639 PAWNEE LANE FRANKLIN LAKES NJ             | i and title if applicable. (NOTE: FD DIRECTORS DELETE  DELETE  DELETE  DELETE                        | Registered Agent s  13. 1.1 TITLE 12 NAME 1.3 STREET A 1.4 CITY-ST- 2.1 TITLE 22 NAME 2.3 STREET A 2.4 CITY-ST- 3.1 TITLE 32 NAME 3.3 STREET A 3.4 CITY-ST- 4.1 TITLE 4.2 NAME 4.3 STREET A 4.4 CITY-ST- 5.1 TITLE 5.2 NAME     | ADDRESS -ZIP -ADDRESS -ZIP -ADDRESS -ZIP -ZIP -ADDRESS -ZIP -ZIP -ZIP -ZIP | when reinstating);  DA  ADDITIONS/CHANGES TO OFFICEF                                       | TE  SS AND DIRECTI  Change  Change  Change | ORS IN 12 Addition Addition Addition | (00)(FF), 1001000                       |
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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 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 corporation of the receiver or truefee empowered to execute this report as required by Chapter 607. Florida Statutes; and that my name appears in 14. I hereby certify that the indicated on this annua officer or director of the Block 12 or Block 13 if

6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

SIGNATURE

TITLE

**FILED** 

Feb 02, 1999 8:00am

**Secretary of State** 

02-02-1999 90016 032 \*\*\*150.00