

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 # 684496 (3)

1. Corporation Name

DEBARTOLO - AVENTURA, INC.



Principal Place of Business

7620 MARKET STREET  
YOUNGSTOWN OH 44513

Mailing Address

7620 MARKET STREET  
YOUNGSTOWN OH 44513  
US

3. Date Incorporated or Qualified

08/18/1980

3a. Date of Last Report

05/01/1995

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

4. FEI Number

34-1318230

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

THE PRENTICE-HALL CORPORATION SYSTEM INC.  
1201 HAYS STREET  
SUITE 105  
TALLAHASSEE FL 32301

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 the date)

(Signature, typed or printed name of registered agent and the date)

DATE

12. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> DELETE
NAME	DEBARTOLO, EDWARD J. J.	
STREET ADDRESS	7620 MARKET ST	
CITY- ST- ZIP	YOUNGSTOWN OH	
TITLE	VD	<input type="checkbox"/> DELETE
NAME	LIBERATI, ANTHONY W	
STREET ADDRESS	7620 MARKET ST	
CITY- ST- ZIP	YOUNGSTOWN OH	
TITLE	VS	<input type="checkbox"/> DELETE
NAME	WOLFALE, ARTHUR D.	
STREET ADDRESS	7620 MARKET ST	
CITY- ST- ZIP	YOUNGSTOWN OH	
TITLE	VTD	<input type="checkbox"/> DELETE
NAME	DAVENPORT, LYNN E.	
STREET ADDRESS	7620 MARKET ST	
CITY- ST- ZIP	YOUNGSTOWN OH	
TITLE	CD	<input type="checkbox"/> DELETE
NAME	YORK, MARIE D.	
STREET ADDRESS	7620 MARKET ST	
CITY- ST- ZIP	YOUNGSTOWN OH	
TITLE	AV	<input type="checkbox"/> DELETE
NAME	MURPHY, JAMES F.	
STREET ADDRESS	7620 MARKET STREET	
CITY- ST- ZIP	YOUNGSTOWN OH	

13.

1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY- ST- ZIP	Edward J. DeBartolo, Jr.
2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	Larry Thraill Kill
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 type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY- ST- ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY- ST- ZIP	
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:

James F. Murphy 4-28-96 (330) 758-7292

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

Display Phone #

CR2E034 (12/95)