## **FILE NOW: FILING FEE IS \$61.25**

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 722201

(1)

THE TWENTY HUNDRED BUILDING, INC.

Principal Place of Business Mailing Address						-			III BIBII IBBI
110 SE SIXTH : P O BOX 14245 FT LAUDERDAL		P O BOX 14245	10 SE SIXTH STREET - 28TH FLOOR O BOX 14245 T LAUDERDALE FL 33302-4245						
						3. Date Incorporated or Qualified 12/06/1971 3a. Date of Last Report 02/29/1996			
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number 65-0122001	Applied For Not Applicable		
Sulte, Apt. #, etc.		Suite, Apt. #, etc.					<u></u>		dditional
22		27				5. Certificate of Status Desired	1 1 -	ee Red	
City & State		City & State				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees			
Zip	Country	Zip	Country			8. This corporation has liability for intangible tax under s. 199.032,			
24	25	29 Pagistared Agent	30			Florida Statutes Yes No			
	9. Name and Address of Current	Registered Agent		10. Name and Address of New Registered Agent  81 Name					
CMITH I	DENNIS DUSTIN								
110 SÉ (	6TH ST, 28TH FL			82	Street Addre	dress (P.O. Box Number is Not Acceptable)			
FT LAUC	) FL 33301			83					
				84	City		FL 85	Zip C	ode
<ol> <li>Pursuant to the provisions of Sections 617 0502 and 617 1508, Florida Statutes, the office or registered agent, or both, in the State of Florida Such change was authorized.</li> </ol>					the corporation	oration submits this statement for the pon's board of directors. I hereby accep	urpose of change t the appointme	jing its ent as r	registered egistered
•	m familiar with, and accept the obliga	tions of, Section 617.0503, Fk	orida Stat	utes					
SIGNATURE .	Signature, typed or printed name of registered agen	nt and title it applicable (NOT	E Registered	1 Ager	nt signature require	d when reinstating)	DATE		<del></del>
12.	OFFICERS AND		13.			ADDITIONS/CHANGES TO OFFIC	ERS AND DIRE	CTOR	3 IN 12
,TITLE	DV	DELETE 1.11		TLE			☐ Ch	ange	Addition
NAME	SCOTT, JAMES A		1.2 NAME						
STREET ADDRESS	110 SE 6TH ST, 28TH FL		1.3 S <sup>7</sup>		ADDRESS				
CITY-ST-ZIP	FT LAUD, FL 00000		1.4 CITY		r-ZIP				
TITLE	STD	☐ DELETE	2.1 111	ΓLE			☐ Ch	ange	Addition
NAME	SMITH, DENNIS DUSTIN	2.2		ME	1				
STREET ADDRESS	110 SE 6TH ST, 28TH FL			.3 STREET ADDRESS					
CITY-ST-ZIP			ITY-S	T- ZIP					
TITLE	PĎ	PD DELETE 3.11		ΓLE			☐ Ch	ange	☐ Addition
NAME	TRIPP, NORMAN D		3.2 NA	ME					ļ
STREET ADDRESS	110 SE 6TH ST, 28TH FL		3.3 ST	REET	ADDRESS				
CITY-ST-ZIP	FT LAUD, FL 00000		3.4. C	TY-S	1 - ZIP				
TITLE		☐ DELETE	4.1 TII	ILE			☐ Ch	ange	☐ Addition
NAME			4. 2 N	AME					
, STREET ADDRESS			4.3 ST	REET	ADDRESS				
CITY-ST-ZIP			4.4 CI	TY-\$1	r- ZIP				
TITLE		☐ DELETE	5.1 111	TLE			☐ Ch	ange	☐ Addition
NAME			5.2 NA	ME					
STREET ADDRESS			5.3 ST	REET	ADDRESS				
CITY-ST-ZIP			5.4 CI	TY-ST	- ZIP				
TITLE		☐ DELETE	6.1 TIT	TLE			☐ Ch	ange	Addition
NAME			6.2 NA	ME					
STREET ADDRESS			6.3 ST	6.3 STREET ADDRESS					
CITY-ST-ZIP			6.4 CF	TY-ST	1-7IP				

14. 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 trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 19 or Block 13 if changed, or on an attachment with an address.

CIONATURE.

Annuary 14 1907

**FILED** 

Jan 29 1997 8:00am

Secretary of State