

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 APR 27 AM 8:57

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 722805 (9)

1. Corporation Name

RAPALLO SOUTH, INC.

Principal Place of Business

Mailing Address

1801 S. FLAGLER DR.
W. PALM BEACH FL 33401

1801 S. FLAGLER DR.
W. PALM BEACH FL 33401

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
03/01/1972

3a. Date of Last Report
05/01/1994

4. FEI Number
59-1440220

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

7. Nonprofit with IRS 501(c)(3)
Tax Exempt Status ☐

\$68.75 Supplemental
Fee Not Required

8. This corporation has liability for intangible tax under S. 189.032,
Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

NASON, GULDAN, YEAGER & GERSON
1645 PALM BEACH LAKES BLVD.
WEST PALM BEACH FL 33402

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 title if applicable

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD
NAME WEINER, ERNEST M.
STREET ADDRESS 1801 S. FLAGLER DRIVE
CITY - ST - ZIP W PALM BCH, FL 00000

11 TITLE T/D
12 NAME MILLER, SCOTT
13 STREET ADDRESS 1801 S. FLAGLER DR.
14 CITY - ST - ZIP W PALM BCH, FL 33401

☐ Change ☒ Addition

TITLE VD
NAME PUTTERMAN, MICHAEL
STREET ADDRESS 1801 S. FLAGLER DRIVE
CITY - ST - ZIP W PALM BCH, FL 00000

DELETE

21 TITLE V/D
22 NAME WILCOXSON, Billy
23 STREET ADDRESS 1801 S. FLAGLER DR.
24 CITY - ST - ZIP W PALM BCH, FL 33401

☐ Change ☒ Addition

TITLE SD
NAME CARR, FRANCES
STREET ADDRESS 1801 S. FLAGLER DR
CITY - ST - ZIP W PALM BCH, FL 00000

31 TITLE D.
32 NAME KIRKBRIDE, NICHOLAS
33 STREET ADDRESS 1801 S. FLAGLER DR.
34 CITY - ST - ZIP W PALM BCH, FL 33401

☐ Change ☒ Addition

TITLE TD
NAME LEWIS, LOTTIE FRENCH
STREET ADDRESS 1801 S. FLAGLER DRIVE
CITY - ST - ZIP W. PALM BEACH FL

41 TITLE V/D
42 NAME
43 STREET ADDRESS
44 CITY - ST - ZIP

☒ Change ☐ Addition

TITLE D
NAME PERLMAN, TERRY
STREET ADDRESS 1801 S. FLAGLER DRIVE
CITY - ST - ZIP W. PALM BEACH FL

51 TITLE D
52 NAME TOLBERT CHIP
53 STREET ADDRESS 1801 S. FLAGLER DR.
54 CITY - ST - ZIP W PALM BCH, FL 33401

☐ Change ☒ Addition

TITLE VD
NAME MORRIS, ROBERT
STREET ADDRESS 1801 S. FLAGLER DR
CITY - ST - ZIP WEST PALM BEACH FL

DELETE

61 TITLE D
62 NAME ERDMAN, JOAN
63 STREET ADDRESS 1801 S. FLAGLER DR.
64 CITY - ST - ZIP W PALM BCH, FL 33401

☐ Change ☒ Addition

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 a receiver or trustee empowered to execute this report as required by Chapter 017, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

ERNEST M. WEINER
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/19/95

407-832-7581

(Name)

(Telephone Number)