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NONPROFIT CORPORATION ANNUAL REPORT **1999**

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 731690

1. Corporation Name

THE LAKES OF EMERALD HILLS, INC.

Principal Place of Business	Mailing Address
8181 W BROWARD BLVD STE 350 FT LAUDERDALE FL 33324 US	8181 W BROWARD BLVD STE 350 FT LAUDERDALE FL 33324 US

2. Principal Place of Business (21)	2a. Mailing Address (26)	3. Date Incorporated or Qualified: 01/21/1975
Suite, Apt. #, etc. (22)	Suite, Apt. #, etc. (27)	4. FEI Number: 59-1655427 — Applied For / Not Applicable
City & State (23)	City & State (28)	5. Certificate of Status Desired ☐ — $8.75 Additional Fee Required
Zip (24) Country (25)	Zip (29) Country (30)	6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees

9. Name and Address of Current Registered Agent

ATKINSON, WILSON C. III
1946 TYLER STREET
STE 350
HOLLYWOOD FL 33020

10. Name and Address of New Registered Agent

81 Name: Marvin P. Pastel, II
82 Street Address (P.O. Box Number is Not Acceptable): Becker & Poliakoff, PA
83 PO Box 9057 3111 Stirling Road
84 City: Ft Lauderdal FL 85 Zip Code: ~~33310~~-33312

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE: [signature] DATE: 4-7-99

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PD	☐ DELETE	1.1 TITLE ☐ Change ☐ Addition
NAME	REESE, STEVEN C		1.2 NAME
STREET ADDRESS	3560 N 32ND TERRACE		1.3 STREET ADDRESS
CITY-ST-ZIP	HOLLYWOOD FL		1.4 CITY-ST-ZIP
TITLE	T	☐ DELETE	2.1 TITLE ☐ Change ☐ Addition
NAME	STRAUSS, KEN		2.2 NAME
STREET ADDRESS	3010 NE 34 STREET		2.3 STREET ADDRESS
CITY-ST-ZIP	HOLLYWOOD FL		2.4 CITY-ST-ZIP
TITLE	VPD	☐ DELETE	3.1 TITLE ☐ Change ☐ Addition
NAME	SHELOMITH, BARRY		3.2 NAME
STREET ADDRESS	3221 N 38TH STREET		3.3 STREET ADDRESS
CITY-ST-ZIP	HOLLYWOOD FL		3.4 CITY-ST-ZIP
TITLE	SEC	☐ DELETE	4.1 TITLE ☐ Change ☐ Addition
NAME	SCHNEIDER, JOEL		4.2 NAME
STREET ADDRESS	3851 N. 31ST TERRACE		4.3 STREET ADDRESS
CITY-ST-ZIP	HOLLYWOOD FL		4.4 CITY-ST-ZIP
TITLE	D	☐ DELETE	5.1 TITLE ☐ Change ☐ Addition
NAME	AST, JULES		5.2 NAME
STREET ADDRESS	3060 NORTH 3RD ST		5.3 STREET ADDRESS
CITY-ST-ZIP	HOLLYWOOD FL 33021		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)(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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: SIGNATURE REQUIRED [signature] X 4/7/99

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E037 (1/1/98)