

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

0281044

PROFIT CORPORATION
ANNUAL REPORT
1999



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

FILED
Mar 29, 1999 8:00 am
Secretary of State

03-29-1999 90041 026 ***150.00

DOCUMENT # 821500

1. Corporation Name
FORT LAUDERDALE & SOUTHERN DEVELOPMENT CORP.

Principal Place of Business
301 SEEBREEZE BLVD.
FORT LAUDERDALE FL 33316

Mailing Address
% R.G. NEWELL
2555 N.E. 11TH STREET, SUITE 309
FORT LAUDERDALE FL 33304



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

25 Country

28 Zip

30 Country

3. Date Incorporated or Qualified

06/03/1968

4. FEI Number

34-1023853

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 owes the current year Intangible Personal Property Tax. Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

NEWELL, R. GREG
2555 N.E. 11TH STREET
SUITE 309
FORT LAUDERDALE FL 33304

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 reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD DELETE
NAME WATSON, RICHARD T
STREET ADDRESS 925 EUCLID AVENUE, SUITE 2000
CITY-ST-ZIP CLEVELAND OH 44115

1.1 TITLE Change Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

TITLE VD DELETE
NAME NEWELL, R. GREGG
STREET ADDRESS 2555 N.E. 11TH STREET, #309
CITY-ST-ZIP CLEVELAND OH 44115

2.1 TITLE Change Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP FT. LAUDERDALE FL 33304-3210

TITLE SD DELETE
NAME SMITH, LYNDIA K
STREET ADDRESS 925 EUCLID AVENUE, SUITE 2000
CITY-ST-ZIP CLEVELAND OH 44115

3.1 TITLE Change Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE VD DELETE
NAME MONSON, JOHN D.
STREET ADDRESS 1100 SUPERIOR AVE
CITY-ST-ZIP CLEVELAND OH

4.1 TITLE Change Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE PD DELETE
NAME WATSON, RICHARD
STREET ADDRESS 925 EUCLIO AVE
CITY-ST-ZIP CLEVELAND OH

5.1 TITLE Change Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE Change Addition
6.2 NAME
6.3 STREET ADDRESS
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 607, 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/98)