

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 MAR 27 AM 10:32

DOCUMENT # **F02780**

(7)

1. Corporation Name

EAST LAKE WOODLANDS REALTY COMPANY

Principal Place of Business

1050 E LAKE WOODLANDS PKWY
P.O. BOX 860
PALM HARBOR FL 34682-7860

Mailing Address

1050 E LAKE WOODLANDS PKWY
P.O. BOX 860
PALM HARBOR FL 34682-7860

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

10/22/1980

3a. Date of Last Report

04/14/1994

4. FEI Number

22-2448570

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business

21

2a. Mailing Address

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

DEAS, WILLIAM J.
2215 RIVER BLVD.
JACKSONVILLE FL 32204

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 fee if applicable

(NOTE: Registered Agent signature required when re-registering)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	D
NAME	GALENAS, ANDREW P.
STREET ADDRESS	520 BROAD ST
CITY ST ZIP	NEWARK NJ
TITLE	S
NAME	WEISS, WILLIAM E.
STREET ADDRESS	520 BROAD ST
CITY ST ZIP	NEWARK NJ
TITLE	VD
NAME	RYAN, MICHAEL S.
STREET ADDRESS	520 BROAD ST
CITY ST ZIP	NEWARK NJ
TITLE	V
NAME	MILLER, ARTHUR M.
STREET ADDRESS	1050 E LAKE WOODLANDS PK
CITY ST ZIP	PALM HARBOR FL
TITLE	ST
NAME	JOHNSON, CHARLES W.
STREET ADDRESS	1050 E LAKE WOODLANDS PK
CITY ST ZIP	PALM HARBOR FL
TITLE	PD
NAME	LYDON, THOMAS P., JR.
STREET ADDRESS	520 BROAD ST
CITY ST ZIP	NEWARK NJ

1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY ST ZIP	
2.1 TITLE	☐ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY ST ZIP	
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY ST ZIP	
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY ST ZIP	
5.1 TITLE	☒ Change ☐ Addition
5.2 NAME	T
5.3 STREET ADDRESS	WILLIAM A. FINELLI
5.4 CITY ST ZIP	520 BROAD STREET NEWARK, NJ 07102
6.1 TITLE	☒ Change ☐ Addition
6.2 NAME	PD
6.3 STREET ADDRESS	YVONNE M. COMPITELLO
6.4 CITY ST ZIP	520 BROAD STREET NEWARK, NJ 07102

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

Arthur M. Miller

Arthur M. Miller, Vice President 3/20/95 (813) 785-5691

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Telephone #