


**2008 FOR PROFIT CORPORATION  
ANNUAL REPORT**


FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

08 MAY 22 AM 8:08

<b>DOCUMENT # F05000005984</b> 1. Entity Name STOLTZ MIZNER COURT, INC.	
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Principal Place of Business 301 YAMATO RD., STE. 3101 BOCA RATON, FL 33431	Mailing Address 301 YAMATO RD., STE. 3101 BOCA RATON, FL 33431
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**DO NOT WRITE IN THIS SPACE**



04152008 No Chg-P CR2E034 (11/05)

4. FEI Number 01-0847182	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent

STOLTZ, MORRIS L II  
301 YAMATO RD., STE. 3101  
BOCA RATON, FL 33431

**DO NOT WRITE  
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

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

<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees	
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	CPS STOLTZ, MORRIS L II 301 YAMATO RD., STE. 3101 BOCA RATON, FL 33431
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  4/28/08 561-998-3311  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #