

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

APPROVED  
AND  
FILED

96 APR 29 AM 10:53

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # F29703 (8)

1. Corporation Name

CARAVAN COURT, INC.

Principal Place of Business

100 SUMMIT LAKE DR  
3 FLOOR NO  
VALHALLA FL 10595  
US

Mailing Address

100 SUMMIT LAKE DR  
3 FLOOR NO  
VALHALLA NY 10595  
US

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

1886 ROUTE 52

1886 ROUTE 52

City & State

City & State

Hopewell Junction, N.Y.

Hopewell Junction N.Y.

Zip

Country

Zip

Country

24 12533

25 US

29 12533

30 US

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

04/28/1981

3a. Date of Last Report

11/27/1995

4. FEI Number

59-2087746

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

10. Name and Address of New Registered Agent

PRENTICE HALL CORPORATION SYSTEM  
1201 HAYS ST

TALLAHASSEE FL 32301

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

000001798960

-04/29/96-01067-003

\*\*\*\*200.00 \*\*\*\*200.00

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

Marcia A. Hanner

Marcia A. Hanner

4/24/94

Signature of person or persons registered agent and the corporation

(NOTE: Registered Agent Signature required when filing this report)

OFFICERS AND DIRECTORS

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

12. TITLE ☐ DELETE

NAME  
D  
TOLLMAN, STANLEY  
STREET ADDRESS  
100 SUMMIT LAKE DR  
CITY - ST - ZIP  
VALHALLA NY 10595

TITLE ☐ DELETE

NAME  
DP  
HUNDLEY, MONTY  
STREET ADDRESS  
100 SUMMIT LAKE DR  
CITY - ST - ZIP  
VALHALLA NY 10595

TITLE ☐ DELETE

NAME  
VS  
FREEDMAN, SANFORD  
STREET ADDRESS  
100 SUMMIT LAKE DR  
CITY - ST - ZIP  
VALHALLA NY 10595

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY - ST - ZIP

1. 1 TITLE

2. 2 NAME

13 STREET ADDRESS

14 CITY - ST - ZIP

2. 1 TITLE

2. 2 NAME

23 STREET ADDRESS

24 CITY - ST - ZIP

3. 1 TITLE

3. 2 NAME

33 STREET ADDRESS

34 CITY - ST - ZIP

4. 1 TITLE

4. 2 NAME

43 STREET ADDRESS

44 CITY - ST - ZIP

5. 1 TITLE

5. 2 NAME

53 STREET ADDRESS

54 CITY - ST - ZIP

6. 1 TITLE

6. 2 NAME

63 STREET ADDRESS

64 CITY - ST - ZIP

☒ Change ☐ Addition

☒ Change ☐ Addition

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☐ 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 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 or changed or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/23/96 914-223-3603

CR2E034 (12/95)