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

APPROVED AND FILED

95 MAY -1 PM 3:29

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F93000003142

1. Corporation Name

MAITLAND CORP.

Principal Place of Business | Mailing Address

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 8/26/93
3a. Date of Last Report:

2. Principal Place of Business
21 C/O G. SOROS REALTY, INC.
22 Suite, Apt. #, etc: 888 7TH AVE.
23 City & State: NEW YORK N.Y.
24 Zip: 10106
25 Country:

2a. Mailing Address
26 C/O G. SOROS REALTY, INC
27 Suite, Apt. #, etc: 888 7TH AVE.
28 City & State: NEW YORK N.Y.
29 Zip: 10106
30 Country:

4. FEI Number: 13-3730287 ☐ 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 has liability for intangible tax under S 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

THE PRENTICE HALL CORPORATION SYSTEM, INC.
1201 HAYS ST.
SUITE 105
TALLAHASSEE, FL. 32301

10. Name and Address of New Registered Agent

01 Name
02 Street Address (P.O. Box Number is Not Acceptable)
03
04 City

700001475357
-05/04/95-01125-020
****200.00 ****225.00
FL 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 _____ DATE
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		11 TITLE	PRESIDENT ☐ Change ☐ Addition
NAME		12 NAME	VERNON SCHWARTZ
STREET ADDRESS		13 STREET ADDRESS	520 MADISON AVE. 33RD FL.
CITY ST ZIP		14 CITY ST ZIP	NEW YORK N.Y. 10
TITLE		21 TITLE	VICE PRESIDENT ☐ Change ☐ Addition
NAME		22 NAME	KEVIN RODGERS
STREET ADDRESS		23 STREET ADDRESS	520 MADISON AVE. 33RD FL.
CITY ST ZIP		24 CITY ST ZIP	NEW YORK N.Y. 10
TITLE		31 TITLE	TREASURER ☐ Change ☐ Addition
NAME		32 NAME	MICHAEL NELSEN
STREET ADDRESS		33 STREET ADDRESS	520 MADISON AVE. 33RD FL.
CITY ST ZIP		34 CITY ST ZIP	NEW YORK N.Y. 10022
TITLE		41 TITLE	ASST. TREASURER ☐ Change ☐ Addition
NAME		42 NAME	PETER STREINGER
STREET ADDRESS		43 STREET ADDRESS	888 7TH AVE.
CITY ST ZIP		44 CITY ST ZIP	NEW YORK N.Y. 10106
TITLE		51 TITLE	DIRECTOR ☐ Change ☐ Addition
NAME		52 NAME	EVAN MARKS
STREET ADDRESS		53 STREET ADDRESS	888 7TH AVE 33RD FL.
CITY ST ZIP		54 CITY ST ZIP	NEW YORK, N.Y. 10106
TITLE		61 TITLE	DIRECTOR ☐ Change ☐ Addition
NAME		62 NAME	GARY GLADSTEIN
STREET ADDRESS		63 STREET ADDRESS	888 7TH AVE. 33RD FL.
CITY ST ZIP		64 CITY ST ZIP	NEW YORK N.Y. 10106

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)(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.

SIGNATURE: _____ 4/18/95 (212) 3975530
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL OFFICER OR DIRECTOR — Date — Daytime Phone #
EVAN M. MARKS