

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # F93000005761 (2)

1. Corporation Name

GP COLONIAL VILLAGE CORP



Principal Place of Business

280 DAINES ST., SUITE 300
BIRMINGHAM MI 48009

Mailing Address

280 DAINES ST., SUITE 300
BIRMINGHAM MI 48009

2. Principal Place of Business

21 Subst. Apt. #, etc.

22 City & State

23 Zip Country

24

25

2a. Mailing Address

26 Subst. Apt. #, etc.

27 City & State

28 Zip Country

29

30

3. Date Incorporated or Qualified

12/20/1993

3a. Date of Last Report

02/10/1995

4. FEI Number

38-3152191

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

RINES, MILTON
15235 S TAMiami TRAIL
FT MYERS FL 33908

10. Name and Address of New Registered Agent

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 of Registered Agent or Director)

(Signature of Registered Agent or Director)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD
NAME ZLOTOFF, PAUL M
STREET ADDRESS 280 DAINES STREET, SUITE 300
CITY, ST, ZIP BIRMINGHAM MI 48009

☐ DELETE

TITLE VS
NAME ADLER, STEVE
STREET ADDRESS 280 DAINES STREET, SUITE 300
CITY, ST, ZIP BIRMINGHAM MI 48009

☐ DELETE

TITLE D
NAME WEISS, ARTHUR
STREET ADDRESS 280 DAINES STREET SUITE 300
CITY, ST, ZIP BIRMINGHAM MI

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE
12 NAME
13 STREET ADDRESS
14 CITY, ST, ZIP

☐ Change ☐ Addition

21 TITLE
22 NAME
23 STREET ADDRESS
24 CITY, ST, ZIP

☐ Change ☐ Addition

31 TITLE
32 NAME
33 STREET ADDRESS
34 CITY, ST, ZIP

☒ Change ☐ Addition

41 TITLE
42 NAME
43 STREET ADDRESS
44 CITY, ST, ZIP

☐ Change ☒ Addition

51 TITLE
52 NAME
53 STREET ADDRESS
54 CITY, ST, ZIP

☐ Change ☐ Addition

61 TITLE
62 NAME
63 STREET ADDRESS
64 CITY, ST, ZIP

☐ Change ☐ Addition

71 TITLE
72 NAME
73 STREET ADDRESS
74 CITY, ST, ZIP

☐ Change ☐ Addition

81 TITLE
82 NAME
83 STREET ADDRESS
84 CITY, ST, ZIP

☐ 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 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

- GLORIA A. KOSTER

2-5-96

810-645-9220

Date

Daytime Phone #

CR2E034 (12/95)