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Apr 30 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # F94000004705 (9)

1. Corporation Name
ROUSE-WEST DADE, INC.



Principal Place of Business
C/O GENERAL COUNSEL, ROUSE COMPANY
10275 LITTLE PATUXENT PARKWAY
COLUMBIA MD 21044

Mailing Address
C/O GENERAL COUNSEL, ROUSE COMPANY
10275 LITTLE PATUXENT PARKWAY
COLUMBIA MD 21044-3414

3. Date Incorporated or Qualified
09/12/1994

3a. Date of Last Report
05/01/1996

2. Principal Place of Business	2a. Mailing Address	4. FEI Number 52-1892709	Applied For Not Applicable
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
22 City & State	27 City & State	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
23 Zip	28 Country	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
24	25	29	30

9. Name and Address of Current Registered Agent
CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

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

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	VAS	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SCHWIESOW, DAVID R	1.2 NAME	
STREET ADDRESS	10275 LITTLE PATUXENT PARKWAY	1.3 STREET ADDRESS	
CITY-ST-ZIP	COLUMBIA MD 21044-3456	1.4 CITY-ST-ZIP	
TITLE	COB	2.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	DEVITO, MATHIAS J	2.2 NAME	VICE-PRESIDENT
STREET ADDRESS	10275 LITTLE PATUXENT PARKWAY	2.3 STREET ADDRESS	GEORGE L. YUNGMAN
CITY-ST-ZIP	COLUMBIA MD 21044-3456	2.4 CITY-ST-ZIP	10275 LITTLE PATUXENT PARKWAY
TITLE	P	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DEERING, ANTHONY W	3.2 NAME	
STREET ADDRESS	10275 LITTLE PATUXENT PARKWAY	3.3 STREET ADDRESS	
CITY-ST-ZIP	COLUMBIA MD	3.4 CITY-ST-ZIP	
TITLE	EV	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MCGREGOR, DOUGLAS A	4.2 NAME	
STREET ADDRESS	10275 LITTLE PATUXENT PARKWAY	4.3 STREET ADDRESS	
CITY-ST-ZIP	COLUMBIA MD 21044-3456	4.4 CITY-ST-ZIP	
TITLE	V	5.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	ALEXANDER, BRUCE D	5.2 NAME	VICE-PRESIDENT
STREET ADDRESS	10275 LITTLE PATUXENT PARKWAY	5.3 STREET ADDRESS	JOHN J. SZYMANSKI
CITY-ST-ZIP	COLUMBIA MD 21044-3456	5.4 CITY-ST-ZIP	10275 LITTLE PATUXENT PARKWAY
TITLE	V	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KASSOLIS, DUKE S	6.2 NAME	
STREET ADDRESS	10275 LITTLE PATUXENT PARKWAY	6.3 STREET ADDRESS	
CITY-ST-ZIP	COLUMBIA MD 21044-3456	6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing 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 chairman, or as an attachment with an address.

SIGNATURE:

[Signature]

VICE-PRESIDENT

[Signature]

(410) 992-6468

CR2E034 (9/96)