PROFIT CORPORATION. ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F95000004084

YUNGMANN, GEORGE L

10275 LITTLE PATUXENT PKWY

NAME

STREET ADDRESS

1. Corporation Name

ROUSE-FORT MYERS, INC.

Principal Place	e of Business	Mailing Address	iling Address			1 1887108 THE LEGEL STATE SERVE SERV			
10275 LITTLE PATUXENT PKWY THE ROUSE COMPANY COLUMBIA MD 21044		10275 LITTLE PATUXENT PKWY THE ROUSE COMPANY COLUMBIA MD 21044			DO NOT WRITE IN THI	S SPACE			
COLUMDIA MD 21044						3. Date Incorporated or Qualifed			
						08/23/1995			
2. Principal P	lace of Business	- OUGE COMPAN'	v			4. FEI Number	Ap	plied For	
21		THE ROUSE COMPANY C/O TAX DEPARTMENT PARKWAY				52-1941258	No	t Applicable	
Suite, Apt. #, etc.		10275 LITTLE PATUXENT PARKWAY COLUMBIA, MARYLAND 21044		5. Certificate of Status Desired	\$8.75 Additional Fee Required				
City & State		COLUMBIA, MARTEMA		6. Election Campaign Financing	\$5.00				
23		Country			Trust Fund Contribution				
Zip	Country	F			 This corporation owes the current year In Personal Property Tax. 	itangible Yes	□No		
24	9. Name and Address of Currer	29 30	<u>, </u>			10. Name and Address of New Registered			
5. Halle alla Address di Cultera Registeron Agent				Name					
CORPORATION SERVICE COMPANY			82	C+-	- 4	ddress (P.O. Box Number is Not Acceptable)			
	HAYS STREET		62	Stre	et Addres	ss (P.O. Box Number is Not Acceptable)			
TALLAHASSEE FL 32301-2525			83						
			84	City		FI	85 Zip C	Code	
11 Pursuant	to the provisions of Sections 607 050	12 and 607 1508. Florida Statutes.	the abov	e-nam	ed corpo	ration submits this statement for the purpose of	f changing its	registered	
office or n	egistered agent, or both, in the State m familiar with, and accept the obliga	of Florida. Such change was auth	iorized by	the co	rporation	's board of directors. I hereby accept the appo	intment as reg	gistered	
SIGNATURE		ANOTE IT	-lateral Ass.	-t -lot	as required.	when reinstating) DATE			
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Rt 12. OFFICERS AND DIRECTORS			13.	in signan	ile ledalied	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTO	RS IN 12	
TITLE	P			1,1 TITLE			Change	☐ Addition	
NAME	DEERING, ANTHONY W		12 NAME						
STREET ADDRESS	ss 10275 LITTLE PATUXENT PKWY 13		1.3 STREE	1.3 STREET ADDRESS					
CITY-ST-ZIP	COLUMBIA MD		1.4 CITY-ST-ZIP		l				
TITLE	V □ DELETE 2.1 T		2.1 TITLE	2.1 TITLE			Change	Addition	
NAME	MCGREGOR, DOUGLAS A 22 N		2.2 NAME		ļ				
STREET ADDRESS	10275 LITTLE PATUXENT PKWY 23 S		2.3 STREE	TADDRE	ss				
CITY-ST-ZIP			2. 4 CITY-	2. 4 CITY-ST-ZIP					
TITLE	VP DELETE 3.1 TI		3.1 TITLE	3.1 TITLE V		P	Change		
NAME	SZYMANSKI, JOHN J		3.2 NAME E		Ε	LIZABETH A HULLINGER			
STREET ADDRESS	AGOTE LITTLE DATINGST DIGINI		3.3 STREET ADDRESS 10		ss 16	0275 LITTLE PATUXENT PKWY		!	
CITY-ST-ZIP	0.014.01.01.01.01.01.01.01.01.01.01.01.01.01.		3.4. CITY-ST-ZIP C		C	OLUMBIA, MD 21044			
TITLE	V □ DELETE 4.1 TI		4.1 TITLE			······································	Change	Addition	
NAME	DONAHUE, JEFFREY H		4. 2 NAME						
STREET ADDRESS	10275 LITTLE PATUXENT PKW	Υ	4.3 STREE	TADDRE	ss			ļ	
CITY-ST-ZIP	COLUMBIA MD 44C		4.4 CITY-S	4.4 CITY-ST-ZIP					
TITLE	VP	☐ DELETE	5.1 TITLE				☐ Change	☐ Addition	
NAME	ROTHSCHILD, BRUCE I		5.2 NAME						
STREET ADDRESS	10275 LITTLE PATUXENT PKW	Υ	5.3 STREE	TADDRE	ss			ı	
CITY-ST-ZIP	COLUMBIA MD		54 CITY-S	ST-ZIP					
TITLE	VP	☐ DELETE	6.1 TITLE				Change	Addition	

COLUMBIA MD CITY-ST-ZIP 14. I 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 changed, or on an attachment with an address, with all other like empowered.

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

410-992-6000

CR2E034 (11/98)

FILED

May 05, 1999 8:00 am Secretary of State

05-05-1999 90176 010 ***150.00

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