FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT CORPORATION** ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

F9600006671 (9) DOCUMENT # F9600006671 (9
THE PARK AT COUNTRYSIDE OPERATING COMPANY

Jul 02 1998 8:00am Secretary of State

Principal Place of Business Mailing Address					
1004 FARNAM ST 1004 FARNAM ST OMAHA NE 68102					
OMAIN NE OC	7106	OMMIN NE COICE		DO NOT WRITE IN TH	IS SPACE
				3. Date incorporated or Qualified 12/19/1996	
2. Principal Pi	ace of Business	2a. Mailing Address 26		4. FEI Number APPLIED FOR 91-(83	
Suite, Apt. #, etc		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be
Zip	Country	28	Country	8. This corporation owes or has paid the	Added to Fees
24	25	Long to the second seco	30	Personal Property Tax due June 30.	Yes No
	9. Name and Address of Curr			10. Name and Address of New Registere	ed Agent
CT	CORPORATION SYSTEM		81 Name		
1200 SOUTH PINE ISLAND ROAD 82 Street Address				ress (P.O. Box Number is Not Acceptable)	· · · · · · · · · · · · · · · · · · ·
PLANTATION FL 33324				(i.e. box (iiii)	
]	₹		83		
			84 City		85 Zip Code
				F	· L   · ·
11. Pursuant t	o the provisions of Sections 607.0	502 and 607.1508, Florida Statute: te of Etorida, Such change was au	s, the above-named corp thorized by the corpora	poration submits this statement for the purpose tion's board of directors. I hereby accept the a	e of changing its registered
agent. Lar	m familiar with, and accept the obl	igations of, Section 607.0505, Flor	ida Statutes.	tone board of an octors. Thereby accept the	Appointment do registered
SIGNATURE .					
12.	Signature, typed or profed name of registered.	agent and the if applicable (NOTE: ND DIRECTORS	Registered Agent signature requi	red when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS A	
TITLE	PO	DELETE	1.1 TITLE	ADDITION OF THE LITTLE TO SET TO LETTER TO	Change Addition
NAME	GREGO, JOSEPH N		1.2 NAME		<b>A</b>
STREET ADDRESS	399 PARK AVE, 19TH FLOC	<del>)R</del> ~•	1.3 STREFT ADDRESS	36th Flas	20-
CITY-ST-ZIP	NEW YORK NY 10022		1.4 CHY-ST-ZIP	20 140	
TITLE	Ū	DELFTE	21 TITLE		Change Addition
NAME	PUTNAM, RANDAL	( -	22 NAME		
STREET ADDRESS	1650 FARNAM ST		2 3 STREET ADDRESS	•	
CITY-ST-ZIP	OMAHA NE 68102		2 4 CITY-ST-ZIP		
TITLE	ŞT .	、 □ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME	THESING, MICHAEL		3.2 NAME		
STREET ADDRESS	1004 FARNAM ST		3.3 STREET ADDRESS		
CITY-ST-ZIP	OMAHA NE 68102		3 4. CITY-ST-ZIP		
TITLE		DELETE	4 1 TITLE		Change Addition
NAME			4 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		DELETE	51 TITLE		Change Addition
NAME			52 NAME		
STREET ADDRESS			53 STREET ADDRESS		
CITY-ST-ZIP		DELETE	54 CITY-ST-ZIP		Change Addition
TITLE		☐ DELETE	6 I TITLE		Change Addition
NAME			62 NAME		
STREET ADDRESS		/	63 STREET ADDRESS		
CITY-ST-ZIP V			6 4 CITY-ST-ZIP	0	

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 informatio indicated on this annual report or supplementation for the control of the corporation of

r ( - 100 ( 462) 111 162