

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

FILED
Apr 30 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # F97000006379 (8)

1. Corporation Name

CAPREIT OF BRADEN LAKES, INC.

Principal Place of Business

11200 ROCKVILLE PIKE, 4TH FLOOR
ROCKVILLE MD 20852

Mailing Address

11200 ROCKVILLE PIKE, 4TH FLOOR
ROCKVILLE MD 20852

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/03/1997

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

25 Country

28 Zip

30 Country

4. FEI Number

52-2055950

Applied For

APPLIED FOR

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

81 Corporation Service Company, Inc.
82 Street Address (P.O. Box Number is Not Acceptable)
1201 Hays Street
83
84 City Tallahassee FL 85 Zip Code 32301

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

Shela L. Hawkins, Asst. Secy.

4-27-98

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 PCEO ☐ DELETE
NAME KADISH, RICHARD L
STREET ADDRESS 11200 ROCKVILLE PIKE, 4TH FLOOR
CITY-ST-ZIP ROCKVILLE MD 20852

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

TITLE CFOD ☐ DELETE
NAME ESPOSITO, BRUCE A
STREET ADDRESS 11200 ROCKVILLE PIKE, 4TH FLOOR
CITY-ST-ZIP ROCKVILLE MD 20852

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE VS ☐ DELETE
NAME GOLDSHINE, JEFFREY A
STREET ADDRESS 11200 ROCKVILLE PIKE, 4TH FLOOR
CITY-ST-ZIP ROCKVILLE MD 20852

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE VS ☐ DELETE
NAME HEYMANN, ERNEST L
STREET ADDRESS 11200 ROCKVILLE PIKE, 4TH FLOOR
CITY-ST-ZIP ROCKVILLE MD 20852

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE V ☐ DELETE
NAME BAND, RICK J
STREET ADDRESS 11200 ROCKVILLE PIKE, 4TH FLOOR
CITY-ST-ZIP ROCKVILLE MD 20852

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE V ☐ DELETE
NAME BECKER, SANDRA L
STREET ADDRESS 11200 ROCKVILLE PIKE, 4TH FLOOR
CITY-ST-ZIP ROCKVILLE MD 20852

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 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.

SIGNATURE

BRUCE A. BAND

SHELA L. HAWKINS

4/28/98

(30) 231-8700

CR2E034 (10/97)