

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

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **G58755** (1)

1. Corporation Name
EVERGLADES LAND DEVELOPMENT CORPORATION



Principal Place of Business: % DIRAN M. SEROPIAN, M.D. 1414 SE 3RD AVE FT LAUDERDALE FL 33316
Mailing Address: % DIRAN M. SEROPIAN, M.D. 1414 SE 3RD AVE FT LAUDERDALE FL 33316

3. Date Incorporated or Qualified: **09/09/1983**
3a. Date of Last Report: **03/13/1995**
4. FEI Number: **59-2454437**
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. 190.032, Florida Statutes: Yes No

2. Principal Place of Business: 21 Suite, Apt. #, etc.: 22 City & State: 23 Zip: 24 Country: 25
2a. Mailing Address: 26 Suite, Apt. #, etc.: 27 City & State: 28 Zip: 29 Country: 30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

SEROPIAN, DIRAN M., M.D.
1414 S.E. 3RD AVE.
FT. LAUDERDALE FL 33316

81 Name: 82 Street Address (P.O. Box Number is Not Acceptable): 83 City: 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: _____ (Name of Registered Agent) _____ (Name of Director) _____ (Date)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	NAME	11 TITLE	Change Addition
STREET ADDRESS	1414 S.E. 3RD AVE.	12 NAME	
CITY-STATE-ZIP	FT. LAUDERDALE FL	13 STREET ADDRESS	
TITLE	NAME	14 CITY-STATE-ZIP	Change Addition
STREET ADDRESS		21 TITLE	Change Addition
CITY-STATE-ZIP		22 NAME	
TITLE	NAME	23 STREET ADDRESS	
STREET ADDRESS		24 CITY-STATE-ZIP	Change Addition
CITY-STATE-ZIP		31 TITLE	Change Addition
TITLE	NAME	32 NAME	
STREET ADDRESS		33 STREET ADDRESS	
CITY-STATE-ZIP		34 CITY-STATE-ZIP	Change Addition
TITLE	NAME	41 TITLE	Change Addition
STREET ADDRESS		42 NAME	
CITY-STATE-ZIP		43 STREET ADDRESS	
TITLE	NAME	44 CITY-STATE-ZIP	Change Addition
STREET ADDRESS		51 TITLE	Change Addition
CITY-STATE-ZIP		52 NAME	
TITLE	NAME	53 STREET ADDRESS	
STREET ADDRESS		54 CITY-STATE-ZIP	Change Addition
CITY-STATE-ZIP		61 TITLE	Change Addition
TITLE	NAME	62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY-STATE-ZIP		64 CITY-STATE-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: *Diran M. Seropian*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Diran Seropian

2/22/96 (954) 486-0400
Date Date/Time #

CR2E034 (12/95)