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 # **G68883** **(9)**

1. Corporation Name
C.C. VILLAGE DEVELOPMENT CORPORATION

Principal Place of Business
LEGAL DEPT. 9TH FL
2601 S. BAYSHORE DR.
MIAMI FL 33133-2461

Mailing Address
LEGAL DEPT. 9TH FL
2601 S. BAYSHORE DR.
MIAMI FL 33133-2461

3. Date Incorporated or Qualified: **11/14/1983**
3a. Date of Last Report: **04/28/1995**

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

4. FEI Number: **59-2345044** Applied For ☐ Not Applicable ☐
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. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent
LANGLEY, MARCIA H
LEGAL DEPT., 9TH FLOOR
2601 S. BAYSHORE DRIVE
MIAMI FL 33133

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's signature required when resigning) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	DP	☐ DELETE	1.1 TITLE	VSD	☑ Change ☐ Addition
NAME	JEFFREY, THOMAS W.		1.2 NAME	Langley, Marcia H.	
STREET ADDRESS	2601 S. BAYSHORE DRIVE		1.3 STREET ADDRESS	2601 S. Bayshore Dr.	
CITY-ST-ZIP	MIAMI FL		1.4 CITY-ST-ZIP	Miami, Fl. 33133	
TITLE	VT	☐ DELETE	2.1 TITLE	VD	☐ Change ☑ Addition
NAME	FISCHER, JOHN H.		2.2 NAME	Carleton, Callis N.	
STREET ADDRESS	2601 S. BAYSHORE DRIVE		2.3 STREET ADDRESS	2601 S. Bayshore Dr.	
CITY-ST-ZIP	MIAMI FL		2.4 CITY-ST-ZIP	Miami, Fl. 33133	
TITLE	DV	☑ DELETE	3.1 TITLE	VAS	☐ Change ☑ Addition
NAME	MIKESH, LINDA A		3.2 NAME	Goldman, Joel K	
STREET ADDRESS	2601 S. BAYSHORE DRIVE		3.3 STREET ADDRESS	2601 S. Bayshore Dr.	
CITY-ST-ZIP	MIAMI FL		3.4 CITY-ST-ZIP	Miami, Fl. 33133	
TITLE	DVAS	☑ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME	GONZALEZ, JULIO J		4.2 NAME		
STREET ADDRESS	2601 S BAYSHORE DR		4.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL 33133		4.4 CITY-ST-ZIP		
TITLE	VS	☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME	LANGLEY, MARCIA H		5.2 NAME	300001783423	
STREET ADDRESS	2601 S BAYSHORE DR		5.3 STREET ADDRESS	-04/17/96--01020--029	
CITY-ST-ZIP	MIAMI FL		5.4 CITY-ST-ZIP	***200.00	
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

JZ 4.16

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: Joel M. — SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date: 4-12-96 — Daytime Phone #: 305-859-4071

CR2E034 (12/95)