

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
May 16, 2000 8:00 am
Secretary of State

05-16-2000 90038 030 ***150.00

DOCUMENT # G68883
 1. Entity Name
ATLANTIC GULF C.C. CORP.

Principal Place of Business Mailing Address
 LEGAL DEPT. 9TH FL LEGAL DEPT. 9TH FL
 2601 S. BAYSHORE DR. 2601 S. BAYSHORE DR.
 MIAMI FL 33133-2461 MIAMI FL 33133-5417



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 3. Mailing Address
4800 N. Federal Highway **200 S. Biscayne Boulevard**

Suite, Apt. #, etc. Suite, Apt. #, etc.
Suite 105E **Suite 4900**

City & State City & State
Boca Raton, FL **Miami, FL**

Zip Country Zip Country
33431 **33131** **33131** **33131**

4. FEI Number Applied For
59-2345044 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent

GOLDMAN, JOEL K
LEGAL DEPT. 9TH FL
2601 S. BAYSHORE DR.
MIAMI FL 33133-2461

Name **K. Lawrence Gragg**
 Street Address (P.O. Box Number is Not Acceptable)
200 S. Biscayne Blvd., Suite 4900
 City **Miami** FL Zip Code **33131**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE *K. Lawrence Gragg* DATE **4/28/00**
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

| 11. OFFICERS AND DIRECTORS | | 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 | |
|--|---|---|---|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | AS COOK, PAULA 2601 S. BAYSHORE DRIVE MIAMI FL 33133 <input checked="" type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | P/D Ackerman, Richard S. 4800 N. Federal Highway, Suite 105E Boca Raton, FL 33431 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | V LAGUARDIA, JOHN 2601 S. BAYSHORE DRIVE MIAMI FL 33133 <input checked="" type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | V Gitlin, Gene 4800 N. Federal Highway, Suite 105E Boca Raton, FL 33431 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | VDC COOK, PAULA 2601 S. BAYSHORE DRIVE MIAMI FL 33133 <input checked="" type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | VSD GOLDMAN, JOEL K. 2601 S BAYSHORE DR MIAMI FL 33133 <input checked="" type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | VAS LANGLEY, MARCIA H 2601 S BAYSHORE DR MIAMI FL 33133 <input checked="" type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | DP JEFFREY, THOMAS W 2601 BAYSHORE DR MIAMI FL 33133 <input checked="" type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | |

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Richard S. Ackerman* Date **4/30/00** Daytime Phone # **561-395-9666**
SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR