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

FILED May 19 1998 8:00am Secretary of State

G C H DEVELOPMENT COHP.							
Principal Place of Business Mailing Address				T THE PROPERTY OF A TRAIN COLOR FOR A STATE OF SECULO SERVE CLOSE OF OUR OF OUR OTHER POOR			
% NORMAN C. BELFER 120 SUNSET AVENUE. SUITE 3C PALM BEACH FL 33480	% NORMAN C. BELFER 120 SUNSET AVENUE. SUITE 3C PALM BEACH FL 33480		ļ	DO NOT WRITE IN THIS SP	ACE		
				3. Date Incorporated or Qualified 12/19/1985			
2. Principal Place of Business 2a. Mailing Address				4. FEI Number	Applied For		
21 26				59-2637902	Not Applicable		
Suite, Apt. #, etc.	Suite, Apt #, etc.				s Desired \$8.75 Additional Fee Required		
City & State	City & State			6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees		
Z ip Country 25	Zip Co 29 30	ountry		8. This corporation owes or has paid the currer Personal Property Tax due June 30.	nt year Intangible Yes 🖟 No		
g, Name and Address of Current Registered Agent			10. Name and Address of New Registered Agent				
BELFER, NORMAN C. 120 SUNSET AVENUE, SUITE 3C PALM BEACH FL 33480		81	Name				
		62	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 Statules, 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 temitiar with, and accept the obligations of. Section 607.0505, Florida Statutes.										
SIGNATURE Stopplure Typed or prailed name of registered agent and their dapplicable (NOTE Registered Agent's gnature required when reinstating) DATE										
12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFF								
TITLE	DV	DELETE	1.1 TITLE		Change	☐ Addition				
NAME	BE LFER, ELINOR		1.2 NAME							
STREET ADDRESS	120 SUNSET AVE.		1.3 STREET ADDRESS							
CITY-ST-ZIP	PALM BEACH FL		1.4 CITY - \$1 - 7IP			· .				
TITLE	DΡ	DELETE	21 TITLE		Change	Addition				
NAME	BELFER, NORMAN C.		2.2 NAME			j				
STREET ADDRESS	120 SUNSET AVE.		2.3 STREET ADDRESS							
CITY-ST-ZIP	PALM BEACH FL		2. 4 CITY - ST - ZIP							
TITLE	\$	DELFTE	3.1 TITLE		Change	Addition				
NAME	BE LFER, LAUREN		3.2 NAME			Ì				
STREET ADDRESS	20 CANTERBURY RD., 1F		3 3 STREET ADDRESS							
CITY-ST-ZIP	GREAT NECK NY		3.4. CITY - \$1 - ZIP							
TITLE	T	DELETE	4.1 TITLE		Change	Addition				
NAME	BELFER-DOPPELT, CAROLYN		4. 2 NAME							
STREET ADDRESS	447 E. SHORE RD.		4.3 STREET ADDRESS							
CITY-ST-ZIP	GREAT NECK NY		4.4 CITY - ST - ZIP							
TITLE		DELETE	5.1 TITLE		Change	Addition				
NAME			5.2 NAME							
STREET ADDRESS			5.3 STREET ADDRESS							
CITY-ST-ZIP			5.4 CITY - ST - ZIP							
TITLE		DELETE	6.1 TITLE		Change	Addition				
NAME			6.2 NAME			ļ				
STREET ADDRESS			6.3 STREET ADDRESS							
CITY-ST-ZIP			6.4 CITY-ST-ZIP			Ì				

14. Thereby 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 suppliemental 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 of truetoe 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, our an attachment of the corporation of the receiver of truetoe.