

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 # J15117 (1)

1. Corporation Name

ADMIRAL'S COVE CONSTRUCTION CO., INC.



Principal Place of Business

200 ADMIRALS COVE BLVD.
JUPITER FL 33477

Mailing Address

200 ADMIRALS COVE BLVD.
JUPITER FL 33477

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

3. Date Incorporated or Qualified

05/20/1986

3a. Date of Last Report

02/13/1995

4. FEI Number

58-1682572

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

HYMAN, SHERRY LEFKOWI
200 ADMIRALS COVE BLVD
JUPITER FL 33477

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 of the person named as registered agent and file, if applicable.

(NOTE: Registered Agent signature required when re-registering)

DATE

12. OFFICERS AND DIRECTORS

11.1 TITLE ☐ DELETE

NAME
FRANKEL, THOMAS
STREET ADDRESS
200 ADMIRALS COVE BLVD.
CITY-ST-ZIP
JUPITER FL

11.2 TITLE ☐ DELETE

NAME
FRANKEL, BENJAMIN
STREET ADDRESS
200 ADMIRALS COVE BLVD.
CITY-ST-ZIP
JUPITER FL

11.3 TITLE ☐ DELETE

NAME
FRANKEL, WILLIAM
STREET ADDRESS
200 ADMIRALS COVE BLVD.
CITY-ST-ZIP
JUPITER FL

11.4 TITLE ☐ DELETE

NAME
FRANKEL, THOMAS
STREET ADDRESS
200 ADMIRALS COVE BLVD.
CITY-ST-ZIP
JUPITER FL

11.5 TITLE ☐ DELETE

NAME
MAKRANSKY, JACK
STREET ADDRESS
200 ADMIRALS COVE BLVD.
CITY-ST-ZIP
JUPITER FL

11.6 TITLE ☐ DELETE

NAME
MAKRANSKY, JACK
STREET ADDRESS
200 ADMIRALS COVE BLVD.
CITY-ST-ZIP
JUPITER FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

13.1 TITLE ☐ Change ☐ Addition

13.2 NAME
13.3 STREET ADDRESS
13.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Thomas Frankel, Pres. 1/19/96 407-744-1700

Date

Signature Printed #

CR2E034 (12/95)