FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # J40547

(8)

LAKE WORTH TURNPIKE ASSOCIATES, INC.

Principal Plac	e of Business	Mailing Address				I KOREKIE DIAN DINIH DUNIH ETIKH BANGI 1841 DINIH BYDIL DADIL DADIL DIDIH DIDIH 1801				
337 E INDIANT	TOWN RD	337 E INDIANTOWN RD								
STE 8 JUPITER FL 33477		STE 8	STE 8 JUPITER FL 33477-5073							
US		U\$				3. Date Incorporated or Qualified 10/21/1986	ŀ	e of Last 6/1996	Report	
—	lace of Business	2a. Mailing Address				4. FEI Number	***********	1	pplied For	
21		26				59-2737682		1	lot Applicable	
Suite, Apt.	#, etc	Suite, Apt. #, etc.				5. Certificate of Status Desired		\$8.75	Additional	
22		27				5. Certificate of Status Desired	Ш	Fee F	Required	
City & Stat	e	City & State			6. Election Campaign Financing	\$5.00 May Be				
23		28				Trust Fund Contribution		Added	to Fees	
Zφ	Country	Zip	Cou	intry		8. This corporation has liability for in			s. 199.032,	
24	25 29 30 9. Name and Address of Current Registered Agent					Florida Statutes Yes No				
		nt Hegistered Agent		- I		10. Name and Address of New Reg	istered A	gent		
	NHOLTZ, JACK W			81	Name					
337		82 Street Address			ess (P.O. Box Number is Not Acceptable	e)	 			
STE	8									
JUP	ITER FL 33477			83						
				84	City			Tan 1 7:		
					•		FL	1	Code	
11. Pursuant	to the provisions of Sections 607 050	02 and 607.1508, Florida Statutes	s, the al	oove	-named corp	poration submits this statement for the pu	rpose of	changing	its registered	
I DINCE OF C	egistered agent, or both, in the State im familiar with, and accept the oblig	ent Florida. Such chanda was au	けいへいてつ	nnı	tha cornorati	ion's board of directors. I hereby accep	t the appo	intment a	s registered	
SIGNATURE		• • • • • • • • • • • • • • • • • • • •								
	Signature, typed or puried name of registered ag-		Registered	d Agei	nt signature require	ed when reinstating)	DATE			
12.		D DIRECTORS				ADDITIONS/CHANGES TO OFFICE	RS AND	DIRECTO	RS IN 12	
T:TLE	PSD	☐ DELETE	DELETE 1.1 TIT				Į	Change	Addition	
NAME	DENHOLTZ, JACK		1.2 N/	1.2 NAME						
STREET ADDRESS			1.3 ST	1.3 STREET ADDRESS					İ	
CITY - ST - ZIP	RAHWAY, NJ.		1.4 CI	1.4 CITY - ST- ZIP						
TITLE	VSD	☐ DELETE 2.1		2.1 TITLE				Change	Addition	
NAME	DENHOLTZ, STEVEN 2		2.2 NA	2.2 NAME						
STREET ADDRESS	1600 ST. GEORGES AVE.		2.3 STREET ADDRESS							
CITY ST-ZIP	MAI BAYAN BIA		2.4 C	2. 4 CITY - ST - ZIP						
TITLE				3.1 TITLE			· I	Change	Addition	
NAME			3.2 NA	ME				,		
STREET ADDRESS	1600 ST. GEORGES AVE.		3.3 STREE		ADDRESS					
City-St-7iP	RAHWAY, NJ.		3.4. CITY-							
TITLE			4.1 TI					Change	Addition	
NAME			4. 2 NAME				•			
STREET ADDRESS			4.3 STREET		ADDRESS					
CITY-ST-ZIP										
TITLE		DELETE	4.4 CITY - S 5.1 TITLE		- LIF		······································	Change	Addition	
NAME		hand Destrict	5.1 HILE 5.2 NAME							
					LDBDCOR					
STREET ADDRESS					ADDRESS					
CITY - ST - ZIP		DELEVE	5.4 CITY ~ S		-ZIP					
TITLÉ		L] DELETE	6.1 TITLE				Ł	Change	Addition	
KAME			6.2 NA	ME						
STREET ADDRESS			6.3 ST	REET /	ADDRESS					
CITY - \$1 , 7(P			0.4.00		C TIED				i	

14. Ido 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 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

Jack W. Denholtz

1/16/97

561-743-8900

Daytime Phone #

FILED

Jan 24 1997 8:00am

Secretary of State