

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 # J48287 (3)

1. Corporation Name

AMIREIT (PALM BEACH GARDENS), INC.



Principal Place of Business

Mailing Address

% THE PRENTICE-HALL CORPORATION SYSTEM INC  
FIRST FLORIDA BANK BUILDING SUITE 420  
TALLAHASSEE FL 32301

6400 S. FIDDLER'S GREEN CR.  
STE 1800  
ENGLEWOOD CO 80111  
US

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

25 Country

28 Zip

30 Country

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified  
12/22/1986

3a. Date of Last Report  
02/14/1995

4. FEI Number  
95-4085969

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

10. Name and Address of New Registered Agent

PRENTICE-HALL CORPORATION SYSTEM, INC.  
1201 HAYES ST.  
STE 105  
TALLAHASSEE FL 32301

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 type: 1 for principal officer or registered agent and the applicable

(N/A) Registered Agent signature required when reinstating

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE DP ☒ DELETE  
NAME SULLIVAN, JOSEPH P  
STREET ADDRESS 6400 S FIDDLER'S GREEN CR. SE 1800  
CITY-ST-ZIP ENGLEWOOD CO

1.1 TITLE V,D,T,S ☐ Change ☐ Addition  
1.2 NAME Michael J. McGee  
1.3 STREET ADDRESS 6400 S Fiddlers Grn Cir #1800  
1.4 CITY-ST-ZIP Englewood, CO 80111

TITLE TDV ☒ DELETE  
NAME STREUFERT, VICTOR C.  
STREET ADDRESS 6400 S FIDDLERS GREEN CR. STE 1800  
CITY-ST-ZIP ENGLEWOOD CO

2.1 TITLE ☐ Change ☐ Addition  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

TITLE DSV ☒ DELETE  
NAME LEWIS, GEOFFREY  
STREET ADDRESS 6400 S. FIDDLER'S GREEN CR. STE. 1800  
CITY-ST-ZIP ENGLEWOOD CO

3.1 TITLE ☐ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

TITLE V ☐ DELETE  
NAME SCHONERT, C. GREGORY  
STREET ADDRESS 6400 S. FIDDLER'S GREEN CR. STE 1800  
CITY-ST-ZIP ENGLEWOOD CO

4.1 TITLE ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

TITLE AS ☐ DELETE  
NAME MCGEE, MICHAEL J.  
STREET ADDRESS 6400 S. FIDDLER'S GREEN CR. STE 1800  
CITY-ST-ZIP ENGLEWOOD CO

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
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

2/8/96

Date

(303) 796-9793

Daytime Phone #

CR2E034 (12/95)