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Feb 03 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

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

Mailing Address

6400 S. FIDDLER'S GREEN CR.
STE 1800
ENGLEWOOD CO 80111-4937
US



3. Date Incorporated or Qualified
12/22/1986

3a. Date of Last Report
02/22/1996

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

24 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

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

9. Name and Address of Current Registered Agent

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

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, typed or printed name of registered agent and title, if applicable)

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE VOTS
NAME SULLIVAN, JOSEPH P
STREET ADDRESS MCGEE, MICHAEL J.
CITY-ST-ZIP ENGLEWOOD CO ☐ DELETE

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

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE DP ☒ Change ☐ Addition
1.2 NAME Joseph P. Sullivan
1.3 STREET ADDRESS 6400 S. Fiddler's Green Circle #1800
1.4 CITY-ST-ZIP Englewood, CO 80111 ☐ Change ☐ Addition

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

3.1 TITLE VD ☒ Change ☐ Addition
3.2 NAME Michael J. McGee
3.3 STREET ADDRESS 6400 S. Fiddler's Green Circle, #1800
3.4 CITY-ST-ZIP Englewood, CO 80111 ☐ Change ☐ Addition

4.1 TITLE VDS ☐ Change ☒ Addition
4.2 NAME Thomas T. Schleck
4.3 STREET ADDRESS 6400 S. Fiddler's Green Circle #1800
4.4 CITY-ST-ZIP Englewood, CO 80111 ☐ Change ☐ Addition

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

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP ☐ Change ☐ Addition

14. I do 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 appears in Block 12 or Block 13 or on an attachment with an address.

SIGNATURE:

(Signature and typed or printed name of signing officer or director)

1/6/97

(303) 796-9793

Date

Daytime Phone #

CR2E034 (9/96)