

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Norham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 MAR 29 PM 6:49

DOCUMENT # J72022

(3)

1. Corporation Name

LEVITT-NORTH PARK, INC.

Principal Place of Business

% LEVITT CORPORATION
7777 GLADES RD. #410
BOCA RATON FL 33434

Mailing Address

% LEVITT CORPORATION
7777 GLADES RD. #410
BOCA RATON FL 33434

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/11/1987

3a. Date of Last Report

04/20/1994

4. FEI Number

65-0219490

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

2. Principal Place of Business

21 Suite, Apt. #, etc.

2a. Mailing Address

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

24 Country

28 Zip

29 Country

9. Name and Address of Current Registered Agent

WIENER, ELLIOTT
7777 GLADES RD.
SUITE 410
BOCA RATON FL 33434

10. Name and Address of New Registered Agent

81 Name

Jeffery Hoyos % Levitt North Park Inc

82 Street Address (P.O. Box Number is Not Acceptable)

7777 Glades Rd

83

Suite 410

84 City

Boca Raton

FL

85 Zip Code

33434

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, if applicable,

(NOTE: Registered Agent signature required when resigning)

DATE

Jeffery Hoyos VP Finance 3-24-95

12. OFFICERS AND DIRECTORS

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

CD
WIENER, ELLIOTT
7777 GLADES RD #410
BOCA RATON FL

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE

12 NAME

13 STREET ADDRESS

14 CITY - ST - ZIP

D/P

☒ Change

☐ Addition

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

P
RAFOFSKY, HARVEY P.
7777 GLADES RD #410
BOCA RATON FL

21 TITLE

22 NAME

23 STREET ADDRESS

24 CITY - ST - ZIP

Delete

☒ Change

☐ Addition

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

VI
HOYOS, JEFFERY
7777 GLADES RD #410
BOCA RATON FL

31 TITLE

32 NAME

33 STREET ADDRESS

34 CITY - ST - ZIP

D/V/TIAS

☒ Change

☐ Addition

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

S
WEST, ALFRED G.
7777 GLADES RD #410
BOCA RATON FL

41 TITLE

42 NAME

43 STREET ADDRESS

44 CITY - ST - ZIP

D/V/2

☒ Change

☐ Addition

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

51 TITLE

52 NAME

53 STREET ADDRESS

54 CITY - ST - ZIP

☐ Change

☐ Addition

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

61 TITLE

62 NAME

63 STREET ADDRESS

64 CITY - ST - ZIP

☐ Change

☐ Addition

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 110.07(3)(a), 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 in an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

VP Finance

3-10-95

407-488100

Jeffery Hoyos