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 # **K20664** **(4)**

1. Corporation Name

CROSSFIELD PROPERTIES, INC.

Principal Place of Business

% ROBERT G. FURMAN
1663 MOUND ST
SARASOTA FL 34236

Mailing Address

% ROBERT G. FURMAN
1663 MOUND ST
SARASOTA FL 34236

3. Date Incorporated or Qualified: **04/11/1988**

3a. Date of Last Report: **04/10/1995**

4. FEI Number: **65-0051678** ☐ 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
22 Suite, Apt. #, etc.
23 City & State
24 Zip 25 County

2a. Mailing Address
26
27 Suite, Apt. #, etc.
28 City & State
29 Zip 30 County

9. Name and Address of Current Registered Agent

FURMAN, ROBERT G.
1663 MOUND ST
SARASOTA FL 34236

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 607.0202 and 607.1913, 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 _____ DATE

12. OFFICERS AND DIRECTORS		
TITLE	PD	☐ DELETE
NAME	FURMAN, ROBERT G.	
STREET ADDRESS	1663 MOUND ST	
CITY-ST-ZIP	SARASOTA FL	
TITLE	D	☐ DELETE
NAME	STEWART, CAROLYN	
STREET ADDRESS	20096 SO OHIO STR APT 5	
CITY-ST-ZIP	DUNNELLON FL	
TITLE	STD	☐ DELETE
NAME	HUEBERT, GWENDOLYN	
STREET ADDRESS	5594 BENEVA WOODS CIRCLE	
CITY-ST-ZIP	SARASOTA FL	
TITLE	D	☐ DELETE
NAME	EICKLEMANN, VIRGINIA	
STREET ADDRESS	3881 PRAIRE DUNES DRIVE	
CITY-ST-ZIP	SARASOTA FL	
TITLE	VD	☐ DELETE
NAME	FURMAN, RICHARD L.	
STREET ADDRESS	434 ORANGE AVE.	
CITY-ST-ZIP	SARASOTA FL	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
1-1 TITLE		☐ Change ☐ Addition
1-2 NAME		
1-3 STREET ADDRESS		
1-4 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		

CR2E034 (12/95)

14. I do hereby certify that the information supplied with this filing is complete, accurate and 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 business entity required 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 added above or on an attachment with an address.

SIGNATURE: Robert G. Furman — Robert G. Furman 3/26/96 941-365-7891

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #