

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 # **K39371** (5)

1. Corporation Name

YALE PROPERTIES ONE, INC.



Principal Place of Business

~~2630 N. MILITARY TRAIL~~
~~SUITE 201 SOUTH~~
~~BOCA RATON FL 33431~~

Mailing Address

~~2630 N. MILITARY TRAIL~~
~~SUITE 201 SOUTH~~
~~BOCA RATON FL 33431~~

2. Principal Place of Business

2a. Mailing Address

21 **5675 S.W. 35th Avenue**

26 **5675 S.W. 35th Avenue**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State

27 City & State

23 **Ft. Lauderdale, FL**

28 **Ft. Lauderdale, FL**

Zip

Country

Zip

Country

24 **33312**

25 **USA**

29 **33312**

30 **USA**

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified
10/18/1988

3a. Date of Last Report
04/26/1995

4. FEI Number

65-0078317

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

DECKELBAUM, GORDON

~~2900 N. MILITARY TRAIL~~
~~SUITE 201 SOUTH~~
~~BOCA RATON FL 33431~~

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)
5675 S.W. 35th Avenue

83

84 City
Ft. Lauderdale

FL

85 Zip Code
33312

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 state if acceptable

(NOTE: Registered Agent Signature required when removing)

Date

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	DELETE
DVP	RICHTER, SAM	2900 N. MILITARY TRAIL	BOCA RATON FL	<input type="checkbox"/>
VSD	RICHTER, MORRIS	2900 N. MILITARY TRAIL	BOCA RATON FL	<input type="checkbox"/>
DP	DECKELBAUM, GORDON	2900 N. MILITARY TRAIL	BOCA RATON FL	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	CHANGE	ADDITION
DVP	RICHTER, Sam	3100 North Ocean Blvd.	Ft. Lauderdale, FL 33308	<input type="checkbox"/>	<input type="checkbox"/>
VSD	RICHTER, Morris	3801 North 41st Avenue	Hollywood, FL 33021	<input type="checkbox"/>	<input type="checkbox"/>
DP	Deckelbaum, Gordon	5675 S.W. 35th Avenue	Ft. Lauderdale, FL 33312	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

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

CR2E034 (12/95)