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Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # K66607 (8)
1. Corporation Name
OXFORD PROPERTIES FLORIDA, INC.

Principal Place of Business Mailing Address
120 ADELAIDE ST. W., SUITE 1700 120 ADELAIDE ST. W., SUITE 1700
TORONTO, ONTARIO M5H1T1 TORONTO, ONTARIO M5H1T1
CA CA

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21 2701 N. ROCKY POINT DR.		26		02/17/1989	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number	
22 SUITE 1000		27		58-1846021	
City & State		City & State		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
23 TAMPA, FLORIDA		28		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
Zip		Country		7. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
24 33607		25 USA		29	
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent	
MORGAN, GREGORY L. 2701 N. ROCKY POINT DR., SUITE 1110 TAMPA FL 33607				81 Name MORGAN, GREGORY L.	
				82 Street Address (P.O. Box Number Is Not Acceptable) 2701 N. ROCKY POINT DR.,	
				83 SUITE 1000	
				84 City TAMPA	
				85 FL	
				86 Zip Code 33607	

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		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	CD <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LOVE, JON E.	1.2 NAME	
STREET ADDRESS	120 ADELAIDE ST. #1700	1.3 STREET ADDRESS	
CITY-ST-ZIP	TORONTO, ONT	1.4 CITY-ST-ZIP	
TITLE	SVS <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WALLACE, JOHN H	2.2 NAME	
STREET ADDRESS	120 ADELAIDE ST W #1700	2.3 STREET ADDRESS	
CITY-ST-ZIP	TORONTO, ONT	2.4 CITY-ST-ZIP	
TITLE	PD <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SMITH, STUART H.B.	3.2 NAME	
STREET ADDRESS	120 ADELAIDE ST W #1700	3.3 STREET ADDRESS	
CITY-ST-ZIP	TORONTO, ONT	3.4 CITY-ST-ZIP	
TITLE	SCD <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MAWANI, AL W.	4.2 NAME	
STREET ADDRESS	120 ADELAIDE ST W #1700	4.3 STREET ADDRESS	
CITY-ST-ZIP	TORONTO, ONT	4.4 CITY-ST-ZIP	
TITLE	T <input type="checkbox"/> DELETE	5.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PUTMAN, ROBERT M	5.2 NAME	
STREET ADDRESS	120 ADELAIDE ST. W. 1700	5.3 STREET ADDRESS	
CITY-ST-ZIP	TORONTO, ONTARIO	5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	
		V MORGAN, GREGORY L. 2701 N. ROCKY POINT DR., SUITE 1000 TAMPA, FLORIDA 33607	

14. I 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 if changed, or in an attachment with an address.

SIGNATURE:

JOHN H. WALLACE MARCH 9, 1998 (416) 865-8300

CR2E034 (10/97)

1998 ANNUAL REPORT - OXFORD PROPERTIES FLORIDA, INC

13. (CONTINUED)

Senior Vice-President & Controller	Kennedy, Anna M.	120 Adelaide St. West Suite 1700 Toronto, Ontario M5H 1T1
Senior Vice-President, Acquisitions	Fraser, Wayne K.	120 Adelaide St. West Suite 1700 Toronto, Ontario M5H 1T1
Treasurer	Murray Snedden	120 Adelaide St. West Suite 1700 Toronto, Ontario M5H 1T1
Assistant Secretary	Sallie Haynes	401 South Fourth Avenue Suite 510 Louisville, Kentucky 40202