

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 # **K99602** (0)
1. Corporation Name
GENERAL DEVELOPMENT BROKER SERVICES CORPORATION



Principal Place of Business

Mailing Address

LEGAL DEPT. 9TH FLOOR
2601 S BAYSHORE DR
MIAMI FL 33133-2461

LEGAL DEPT. 9TH FLOOR
2601 S BAYSHORE DR
MIAMI FL 33133-2461

3. Date Incorporated or Qualified 06/29/1989	3a. Date of Last Report 04/28/1995
4. FEI Number 65-0132972	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. 193.032, Florida Statutes ☐ Yes ☐ No	

2. Principal Place of Business	2a. Mailing Address
21. Suite, Apt. #, etc.	26. Suite, Apt. #, etc.
22. City & State	27. City & State
23. Zip	28. Zip
24. Country	29. Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

LANGLEY, MARCIA H
LEGAL DEPT., 9TH FLOOR
2601 S. BAYSHORE DRIVE
MIAMI FL 33133

81. Name	
82. Street Address (P.O. Box Number is Not Acceptable)	
83. City	
84. Zip Code	FL

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 of registered agent or officer 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	DP	1.1 TITLE	VSD
NAME	JEFFREY, THOMAS W.	1.2 NAME	Langley, Marcia H.
STREET ADDRESS	2601 S. BAYSHORE DRIVE	1.3 STREET ADDRESS	2601 S. Bayshore Dr.
CITY-ST-ZIP	MIAMI FL	1.4 CITY-ST-ZIP	MIAMI, FL 33133
TITLE	VS	2.1 TITLE	VAS
NAME	LANGLEY, MARCIA H.	2.2 NAME	Goldman, Joel K.
STREET ADDRESS	2601 S. BAYSHORE DRIVE	2.3 STREET ADDRESS	2601 S. Bayshore Dr.
CITY-ST-ZIP	MIAMI FL	2.4 CITY-ST-ZIP	MIAMI, FL 33133
TITLE	VT	3.1 TITLE	VD
NAME	FISCHER, JOHN H.	3.2 NAME	Carleton, Callis N.
STREET ADDRESS	2601 S. BAYSHORE DRIVE	3.3 STREET ADDRESS	2601 S. Bayshore Dr.
CITY-ST-ZIP	MIAMI FL	3.4 CITY-ST-ZIP	MIAMI, FL 33133
TITLE	DV	4.1 TITLE	
NAME	MIKESH, LINDA A	4.2 NAME	
STREET ADDRESS	2601 S. BAYSHORE DRIVE	4.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL	4.4 CITY-ST-ZIP	
TITLE	DVAS	5.1 TITLE	100001783391
NAME	GONZALEZ, JULIO J	5.2 NAME	-04/17/96--01020--012
STREET ADDRESS	2601 S BAYSHORE DR	5.3 STREET ADDRESS	***200.00
CITY-ST-ZIP	MIAMI FL 33133	5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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

4-12-96

305-859-4071

Date

Daytime Phone

CR2E034 (12/95)