## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**CORPORATION ANNUAL REPORT** 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(5)

ATLANTIC GULF REALTY, INC.

FILED

98 FEB 18 PM 4: 10

SECRETARY OF STATE TALLAHASSEE. FLORIDA



Principal Place o	f Business	Mailing Address							
LEGAL DEPT. 9TH FLOOR 2601 \$ BAYSHORE DR MIAMI FL 33133-2461		LEGAL DEPT. 9TH FLOOR 2601 S BAYSHORE DR MIAMI FL 33133-2481				DO NOT WRITE IN THIS SE	PACE		
						<ol> <li>Date Incorporated or Qualified</li> <li>12/20/1989</li> </ol>			
2. Principal Place of Business		2a. Mailing Address				4. FEI Number		Applied For	
21		26				65-0165036		Not Applicable	
Suite, Apt. #, etc.		27				5. Certificate of Status Desired	• •	5 Additional Required	
City & State		City & State				Election Campaign Financing     Trust Fund Contribution		00 May Be ed to Fees	
Zip <b>24</b>	Country 25	Zip [29]	Country 30			8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.			
	g, Name and Address of Cu	rrent Registered Agent		<u> </u>	10. Name and Address of New Registered Agent				
GOLDMAN, JOEL K LEGL DEPT. 9TH FLOOR				81	Name				
2601				Street Addr	ress (P.O. Box Number is Not Acceptable)				
MIAM	FL 33133			83		·			
				84	,	FL		ip Code	
Dirice or regis	he provisions of Sections 607, stered agent, or both, in the St amiliar with, and accept the of	tate of Fiorida. Such chan	de was authorize	a by	the corporati	poration submits this statement for the purpose of clion's board of directors. I hereby accept the appoi	hangin ntment	g its registered as registered	
RIGNIATURE									

agent. i a	am ramiliar with, and accept the obligations of	ol, Section 607.0505, Flor	rida Statutes.		
SIGNATURE	Signature, typud or printed name of registered agent and title	le il epolicable. (NOTE	· Registered Agent signatur	e required when reinstating)	DATE
12.	OFFICERS AND DIRE		13.	ADDITIONS/CHANGES TO OFFIC	
TITLE	OP	☐ DELETE	1.1 TITLE	T V	Change XX Addition
NAME	JEFFREY, THOMAS W.		1.2 NAME	Gibbete, J Thomas	
STREET ADDRESS	2601 S. BAYSHORE DRIVE		1.3 STREET ADDRESS	2601 S. Bayshore Drive	2
CITY-ST-ZIP	MIAMI FL		1.4 CITY - ST - ZIP	Miami, Florida 33133	
TITLE	VAS	DELETE	2.1 TITLE	VDCAS	☐ Change 🗶 Addition
NAME 🤼	LANGLEY, MARCIA H.		2.2 NAME	Cook Paula	
STREET ADDRESS	2601 S. BAYSHORE DRIVE		2.3 STREET ADDRESS	2601 S. Bayshore Drive	
CITY-ST-ZÎP	MIAMI FL			Miami, Florida 33133	
TITLE	<b>प</b>	DELETE	3.1 TITLE	v	Change Addition
NAME	FISCHER, JOHN H.		3.2 NAME	Laguardia, John	
STREET ADDRESS	2601 S. BAYSHORE DRIVE			2601 S. Bayshore Drive	
CITY-ST-ZIP	MIAMI FL		3.4. CITY - ST - ZIP	Miami, Florida 33133	
TITLE	V\$	DELETE	4.1 TITLE		Change Addition
NAME	GOLDMAN, JOEL K.		4. 2 NAME	0000024 -02/19/9	32150
STREET ADDRESS	2601 S BAYSHORE DR		4.3 STREET ADDRESS	-02/19/3	/8U11U4U25
CITY-ST-ZIP	MIAMI FL		4.4 CITY - ST - ZIP	###₩158	1.75 ****158.75
TITLE	D	☐ DELETE	5.1 TITLE		Change Addition
NAME	ANNESS, LISA D.		5.2 NAME		
STREET ADDRESS	2601 S. BAYSHORE DRIVE		5.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL	_	5.4 CITY-ST-ZIP		<u>. (1</u>
TITLE	V	DELETE	6.1 TITLE		C/Ange) Addition
NAME	DALFO, CHRISTOPHER L.		6.2 NAME	ا ا	$\langle 0 \rangle \langle 0 \rangle \langle 0 \rangle \langle 0 \rangle$
STREET ADDRESS	9801 S. FEDERAL HWY.		6.3 STREET ADDRESS	\ \^	#Kh    b l
CITY-ST. 7IP	PORT ST. LUCIE EL		CACITY OF TID	l (	%/// <b>JV</b>

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. Herrher Certify that the information indicated on this annual report or suppliemental 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 receivor 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.