

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **L38927** (4)

1. Corporation Name

CROSSINGS AT 45TH STREET, INC.



Principal Place of Business

Mailing Address

**1540 LATHAM ROAD
WEST PALM BEACH FL 33409**

**1540 LATHAM ROAD
WEST PALM BEACH FL 33409**

3. Date Incorporated or Qualified

12/28/1989

3a. Date of Last Report

05/01/1995

4. FEI Number

65-0164826

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

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24 25 29 30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**CATALFUMO, DANIEL S.
1540 LATHAM RD
W PALM BCH FL 33409-2181**

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 607.0502 and 607.1506, 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 registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE
NAME **PDS CATALFUMO, DANIEL S.**
STREET ADDRESS **1540 LATHAM ROAD**
CITY- ST- ZIP **WEST PALM BEACH FL**

TITLE ☐ DELETE
NAME **D BERRIS, JEFFREY**
STREET ADDRESS **1540 LATHAM ROAD**
CITY- ST- ZIP **WEST PALM BEACH FL**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE ☐ DELETE
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STREET ADDRESS
CITY- ST- ZIP

TITLE ☐ DELETE
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TITLE ☐ DELETE
NAME
STREET ADDRESS
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 owner or trustee or person 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

DANIEL S. CATALFUMO

4/25/95

Date

(407) 471-0338

Date of Filing

CR2E034 (12/95)