FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION
ANNUAL REPORT
1995

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

APPROVED
AND
FILED

95 APR -1 AM 10:36

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **L61052** **(1)**

1. Corporate Name
GMA DEVELOPERS, INC.

Principal Place of Business
8001 RADIO ROAD
NAPLES FL 33942

Mailing Address
8001 RADIO ROAD
NAPLES FL 33942

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 03/29/1990
3a. Date of Last Report: 03/28/1994

2. Principal Place of Business — 21
2a. Mailing Address — 26
Suite, Apt. #, etc. — 22 / 27
City & State — 23 / 28
24 / 25 / 29 / 30

4. FEI Number: 65-0375983 — 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. X Yes ☐ No

9. Name and Address of Current Registered Agent
NAGAR, JACOB
8001 RADIO ROAD
NAPLES FL 33942

10. Name and Address of New Registered Agent
81 Name: Terry A. Lurie
82 Street Address: P.O. Box Number is Not Acceptable: 2430 Shadowlawn Drive, Suite 18
83
84 City: Naples FL 85 Zip Code: 33962

11. [illegible] Florida Statutes, the above named corporate entity submits the statement for the purpose of complying with registered agent, or both, in the State of Florida. [illegible] authorized to do business in Florida. I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all laws applicable to the performance of my duties. Florida Statutes.

SIGNATURE: [illegible] 4/26/95

12. OFFICER AND DIRECTOR DATA

TITLE	PD
NAME	NAGAR, JACOB
ADDRESS	8001 RADIO ROAD
CITY, ST, ZIP	NAPLES FL
TITLE	V
NAME	JEDA, RON
ADDRESS	8001 RADIO ROAD
CITY, ST, ZIP	NAPLES FL

13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS DATA

TITLE		☐ Change ☐ Addition
NAME		
ADDRESS		
CITY, ST, ZIP		
TITLE		☐ Change ☐ Addition
NAME		
ADDRESS		
CITY, ST, ZIP		
TITLE		☐ Change ☐ Addition
NAME		
ADDRESS		
CITY, ST, ZIP		
TITLE		☐ Change ☐ Addition
NAME		
ADDRESS		
CITY, ST, ZIP		
TITLE		☐ Change ☐ Addition
NAME		
ADDRESS		
CITY, ST, ZIP		
TITLE		☐ Change ☐ Addition
NAME		
ADDRESS		
CITY, ST, ZIP		

14. I hereby certify that the information supplied with this filing, and any other information voluntarily furnished, does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. Further, I certify that the information indicated on the 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 of this report or attached hereto with an address.

SIGNATURE: [illegible] Jacob Nagar, President — 4/26/95 — 813-353-2500
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Telephone #

0320245 CP