

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 # **L82243** (1)

1. Corporation Name

CHESAPEAKE PROPERTIES OF CLEARWATER, INC.



Principal Place of Business

Mailing Address

C/O DAVID P. BURKE
ONE HARBOUR PLACE, SUITE 500
TAMPA FL 33602

% ALPER HOLDINGS USA INC
767 3RD AVE. 34TH FLR
NEW YORK NY 10017
US

3. Date Incorporated or Qualified

06/20/1990

3a. Date of Last Report

05/01/1995

4. FEI Number

06-1317943

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 **800 Third Avenue**

Suite, Apt. #, etc.
22 **24th Floor**

City & State
23 **New York, NY**

Zip
24 **10022**

Country
25 **USA**

26 **800 Third Avenue**

Suite, Apt. #, etc.
27 **24th Floor**

City & State
28 **New York, NY**

Zip
29 **10022**

Country
30 **USA**

9. Name and Address of Current Registered Agent

**THE PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYS STREET
SUITE 105
TALLAHASSEE FL 32301**

10. Name and Address of New Registered Agent

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 607.1508, 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, type or print name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME **PDC**
COMBENALE, NICOLAS
STREET ADDRESS **767 THIRD AVE**
CITY-ST-ZIP **NEW YORK NY**

TITLE ☐ DELETE

NAME **V**
GUZMAN, VIVIANA
STREET ADDRESS **767 THIRD AVE**
CITY-ST-ZIP **NEW YORK NY**

TITLE ☒ DELETE

NAME **SD**
ROBBINS, SCOTT
STREET ADDRESS **767 THIRD AVE**
CITY-ST-ZIP **NEW YORK NY**

TITLE ☐ DELETE

NAME **TD**
HOLDSBERG, JEFFREY
STREET ADDRESS **767 3RD AVE**
CITY-ST-ZIP **NEW YORK NY**

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☒ Change ☐ Addition

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS **800 Third Avenue, 24th Floor**
1.4 CITY-ST-ZIP **New York, NY 10022**

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME **V/AT**
2.3 STREET ADDRESS **800 Third Avenue, 24th Floor**
2.4 CITY-ST-ZIP **New York, NY 10022**

3.1 TITLE ☐ Change ☒ Addition

3.2 NAME **AS**
3.3 STREET ADDRESS **David P. Rankin**
3.4 CITY-ST-ZIP **800 Third Avenue, 24th Floor**
New York, NY 10022

4.1 TITLE ☒ Change ☐ Addition

4.2 NAME **V/D**
4.3 STREET ADDRESS **800 Third Avenue, 24th Floor**
4.4 CITY-ST-ZIP **New York, NY 10022**

5.1 TITLE ☐ Change ☒ Addition

5.2 NAME **V/S**
5.3 STREET ADDRESS **John H. Coghlin**
5.4 CITY-ST-ZIP **800 Third Avenue, 24th Floor**
New York, NY 10022

6.1 TITLE ☐ Change ☒ Addition

6.2 NAME **V/T/D**
6.3 STREET ADDRESS **Wayne R. Smith**
6.4 CITY-ST-ZIP **800 Third Avenue, 24th Floor**
New York, NY 10022

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, unchanged, or on an attachment with a new address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

John H. Coghlin, Secretary

2/28/96

212-508-7558

CR2E034 (12/95)