

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

FILED

Apr 07 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # L85115 (8)

1. Corporation Name

LEVITT AT ST. ANDREWS PLACE, INC.

#307

Principal Place of Business

7777 GLADES ROAD  
SUITE 410  
BOCA RATON FL 33434

Mailing Address

7777 GLADES ROAD  
SUITE 410  
BOCA RATON FL 33434

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/29/1990

4. FEI Number

65-0205870

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 owes or has paid the current year Intangible  
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

30

9. Name and Address of Current Registered Agent

ALLEN, LOUISE J.  
150 W FLAGLER ST  
2200 MUSEUM TOWER  
MIAMI FL 33130

10. Name and Address of New Registered Agent

81

Name

HOYOS, Jeffery

82

Street Address (P.O. Box Number is Not Acceptable)

7777 Glades Road

83

Suite 410

84

City

Boca Raton

FL

85 Zip Code

33434

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, typed or printed name of registered agent and fee, if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

3-30-98

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME  
DP  
WIENER, ELLIOTT M  
STREET ADDRESS  
7777 GLADES RD #410  
CITY-ST-ZIP  
BOCA RATON FL

TITLE ☐ DELETE

NAME  
SVP  
ARMSTRONG, JOEL  
STREET ADDRESS  
7777 GLADES ROAD, SUITE 410  
CITY-ST-ZIP  
BOCA RATON FL 33434

TITLE ☐ DELETE

NAME  
VTAS  
HOYOS, JEFFREY  
STREET ADDRESS  
7777 GLADES RD. #410  
CITY-ST-ZIP  
BOCA RATON FL

TITLE ☐ DELETE

NAME  
VSD  
WEST, ALFRED G  
STREET ADDRESS  
7777 GLADES RD. #410  
CITY-ST-ZIP  
BOCA RATON FL

TITLE ☐ DELETE

NAME  
V  
SLEEK, HARRY T  
STREET ADDRESS  
7777 GLADES RD. #410  
CITY-ST-ZIP  
BOCA RATON FL

TITLE ☐ DELETE

NAME  
VP  
DAMIANO, TOM  
STREET ADDRESS  
7777 GLADES ROAD, SUITE 410  
CITY-ST-ZIP  
BOCA RATON FL 33434

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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. 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

Jeffery Hoyos 3/14/98 (561) 482-5100

CR2E034 (10/97)