

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

APPROVED AND FILED

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**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

**CORPORATION
ANNUAL REPORT
1995**



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

DOCUMENT # L98537 (8)

1. Corporation Name

YALE PROPERTIES-BOCA ONE, INC.

Principal Place of Business

**2900 NORTH MILITARY TRAIL
SUITE 201
BOCA RATON FL 33431**

Mailing Address

**2900 NORTH MILITARY TRAIL
SUITE 201
BOCA RATON FL 33431**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

09/10/1990

3a. Date of Last Report

04/07/1994

4. FEI Number

65-0216701

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 § 199.032, Florida Statutes

Yes No

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

24

Zip

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

29

Country

2b. Mailing Address

28

Suite, Apt. #, etc.

29

City & State

30

Zip

Country

9. Name and Address of Current Registered Agent

**DECKELBAUM, GORDON
SUITE 201 S.
2900 N. MILITARY TRAIL
BOCA RATON FL 33431**

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, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE

**DVP
RICHTER, SAM
2900 N. MILITARY TR. 201
BOCA RATON FL**

TITLE

**DS
RICHTER, MORRIS
2900 N. MILITARY TR. 201
BOCA RATON FL**

TITLE

**DP
DECKELBAUM, GORDON
2900 N. MILITARY TR. 201
BOCA RATON FL**

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

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 do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(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 if changed, or on an attachment with an address.

SIGNATURE:

(Signature)
SIGNATURE AND TYPED OR PRINTED NAME OF BOHNING OFFICER OR DIRECTOR

GORDON DECKELBAUM, PRESIDENT

4/3/95 407-994-2133
(Date) (Myself / Proxy)