

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

FILED

Apr 14 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **M05052** (9)
1. Corporation Name
PENN PROPERTIES GROUP, INC.



Principal Place of Business 11000 PLACIDA ROAD #2804 PLACIDA FL 33946	Mailing Address 3191 CORAL WAY SUITE 405 MIAMI FL 33145-3213 US
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3. Date Incorporated or Qualified 09/07/1984	3a. Date of Last Report 05/01/1996
4. FEI Number 59-2559990	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 21 3191 Coral Way Suite, Apt. #, etc. 22 Suite 405 City & State 23 Miami, FL Zip 24 33145	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country 25 U.S.A. 30
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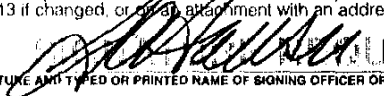
9. Name and Address of Current Registered Agent HAUSER, JAMES A. 3191 CORAL WAY SUITE 405 MIAMI FL 33145	10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code
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11. Pursuant 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DPT ☐ DELETE	1.1 TITLE	D, P, T ☒ Change ☐ Addition
NAME	PENZELL, JAMES P.	1.2 NAME	Penzell, James P.
STREET ADDRESS	11000 PLACIDA ROAD	1.3 STREET ADDRESS	2727 Sharon Lane
CITY - ST - ZIP	PLACIDA FL	1.4 CITY - ST - ZIP	Charlotte, NC 28211
TITLE	S ☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	HAUSER, JAMES A.	2.2 NAME	
STREET ADDRESS	3191 CORAL WAY SUITE 405	2.3 STREET ADDRESS	
CITY - ST - ZIP	MIAMI FL	2.4 CITY - ST - ZIP	
TITLE	VPA ☒ DELETE	3.1 TITLE	VP, AS ☐ Change ☒ Addition
NAME	PENZELL, DONNA R.	3.2 NAME	Epperson, Shelia G.
STREET ADDRESS	2717 FOXFIRE ROAD	3.3 STREET ADDRESS	2727 Sharon Lane
CITY - ST - ZIP	CHARLOTTE FL	3.4 CITY - ST - ZIP	Charlotte, NC 28211
TITLE	☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY - ST - ZIP		4.4 CITY - ST - ZIP	
TITLE	☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE	☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		6.4 CITY - ST - ZIP	

14. I do 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 as an addendum with an address.

SIGNATURE:  **4/7/97** (305) 529-1900
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR **JAMES A. HAUSER, SECTY** Daytime Phone # **0202385**

CR2E034 (9/96)