PROFIT CORPORATION ANNUAL REPORT

1999

1. Corporation Name

DOCUMENT # M47446

GENERAL DEVELOPMENT RESORTS, INC.



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

Apr 15, 1999 8:00 am Secretary of State

04-15-1999 90051 002 ***158.75

Principal Place of Business Mailing Address					[(Bliffell til 1/10) inen eren eren er	10 3111 01011 010	() Bint ninii	#1#IF #1#II (##I	
LEGAL DEPT. 9TH FLOOR 2601 S BAYSHORE DR LEGAL DEPT. 9TH FLOOR 2601 S BAYSHORE DR					DO NOT WRITE IN THIS SPACE				
MIAMI FL 33133-2461 MIAMI FL 33133-2461					3. Date Incorporated or Qualifed				
					02/27/1987			1	
2 Principal Pl	ace of Business	2a. Mailing Address			4, FEI Number		- TAr	pplied For	
21	age of Business	26			59-2778647		No.	ot Applicable	
Suite, Apt.	# etc	Suite, Apt. #, etc.				₩	\$8.75	Additional	
22 27		27			5. Certifcate of Status Desired	X		equired	
City & State City & State		City & State			6. Election Campaign Financing			May Be	
23 28					Trust Fund Contribution			to Fees	
Zip	Country	Zip	Country		· ·	8. This corporation owes the current year Intangible Personal Property Tax Yes No			
24	[25]	29 30				Personal Property Tax. Yes LINO 10. Name and Address of New Registered Agent			
-	9. Name and Address of Current	Registered Agent	81	Name		egistereu A	gent		
COL	DMAN IOCI K		81	INAITIE					
1	dman, joel K Al Dept., 9th floor		82	Street	Address (P.O. Box Number is Not Accepta	ble)			
2601 S. BAYSHORE DRIVE		83							
MIAN	/II FL 33133		84	City		FL	85 Zip	Code	
			ل_	L			hanging its	ragintared	
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									
0.0	Signature, typed or printed name of registered agent			nt signature	required when reinstating)	DATE	- DECT		
12.	OFFICERS ANI		13.		ADDITIONS/CHANGES TO OFF	-ICERS AND	☐ Change	Addition	
TITLE	DP	☐ DELETE	1.1 TITLE				☐ Citatige		
NAME	JEFFREY, THOMAS W.		1.2 NAME						
STREET ADDRESS	TREET ADDRESS 2601 S. BAYSHORE DRIVE		1.3 STREE	FADDRESS	1				
CITY-ST-ZIP	MIAMI FL 1.4 CI		1.4 CITY-S	t-ZIP					
TITLE	VAS DELETE 2.1 π		2.1 TITLE				☐ Change	Addition	
NAME	LANGLEY, MARCIA H. 22N		2.2 NAME					1	
STREET ADDRESS	2601 S. BAYSHORE DRIVE		2.3 STREE	TADDRESS	·[i	
CITY-ST-ZIP	P MIAMI FL 2.40		2.4 CITY-5	T-ZIP					
TITLE	VT	☐ DELETE 3.1					☐ Change	☐ Addition	
NAME	FISCHER, JOHN H.	3.2 N							
STREET ADDRESS	2601 S. BAYSHORE DRIVE	DRIVE 3.3 s		TADDRESS	:				
CITY-ST-ZIP	MIAMI FL		3.4. CITY-S	T-Z∤P					
TITLE	VSD	☐ DELETE	4.1 TITLE				☐ Change	☐ Addition	
NAME	GOLDMAN, JOEL K.		4. 2 NAME						
STREET ADDRESS	2601 S. BAYSHORE DRIVE		4.3 STREE	TADORESS					
CITY-ST-ZIP	MIAMI FL		4.4 CITY-S	T-ZIP					
TITLE	VDCA	☐ DELETE	5.1 TITLE		V/D/C/AS		Change	Addition	
NAME	COOK, PAULA		5.2 NAME		Cook, Paula				
STREET ADDRESS	2601 S BAYSHORE DR		5.3 STREE	TADORES\$					
			5.4 CITY-S		2001 S. Bayshore Dire				
CITY-ST-ZIP	MIAMI FL 33133	☐ DELETE	6.1 TITLE		Miami FL 33133		Change	Addition	
TITLE	V LACHADDIA IOUN		6.2 NAME					_	
NAME	LAGUARDIA, JOHN			TADDRESS					
STREET ADDRESS	2601 S BAYSHORE DR		U.S STREE	1 AUURESS	'				

MIAMI FL 33133 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 suppliemental 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, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

365-859-4000