

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 # M66815 (5)

1. Corporation Name
MARLEX HOUSING, INC.



Principal Place of Business

Mailing Address

2201 NW CORPORATE BLVD
SUITE 104
BOCA RATON FL 33431
US

2201 NW CORPORATE BLVD
SUITE 104
BOCA RATON FL 33431
US

3. Date Incorporated or Qualified
02/03/1988

3a. Date of Last Report
06/05/1995

2. Principal Place of Business

21 6001 N.W. 61st AVENUE

Suite, Apt. #, etc.

2a. Mailing Address

26 21218 St. Andrews Blvd.

Suite, Apt. #, etc.

22 City & State

23 PARKLAND, FL

Zip

24 33067-4402

Country

25 USA

27 #636

City & State

28 BOCA RATON, FL

Zip

29 33431

Country

30 USA

4. FEI Number

65-0029875

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BLASI, ANDREW B. PA
ARVIDA PARKWAY CENTRE
7900 GLADES RD, STE 445
BOCA RATON 33434

81 DONALD C. ALEXANDER

82 Street Address (P.O. Box Number is Not Acceptable)
6001 N.W. 61st AVENUE

83

84 City
PARKLAND,

FL

85 Zip Code
33067-4402

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.

DONALD C. ALEXANDER, PRESIDENT

SIGNATURE

Signature, typed or printed name of registered agent and the applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PS ☐ DELETE

NAME ALEXANDER, DONALD C
STREET ADDRESS 2201 NW CORPORATE BLVD STE 104
CITY-ST-ZIP BOCA RATON FL

TITLE VT ☐ DELETE

NAME TREADWELL, NORMA J
STREET ADDRESS 2201 NW CORPORATE BLVD STE 104
CITY-ST-ZIP BOCA RATON FL

TITLE AS ☐ DELETE

NAME ALEXANDER, MARIAN E
STREET ADDRESS 2201 NW CORPORATE BLVD STE 104
CITY-ST-ZIP BOCA RATON FL

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS 6001 N.W. 61st AVENUE
1.4 CITY-ST-ZIP PARKLAND, FL 33067-4402

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS 5600-H COACH HOUSE CIRCLE
2.4 CITY-ST-ZIP BOCA RATON, FL 33486

3.1 TITLE ☒ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS 6001 N.W. 61st AVENUE
3.4 CITY-ST-ZIP PARKLAND, FL 33067-4402

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 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 if changed, or on an attachment with an address.

DONALD C. ALEXANDER, PRESIDENT

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/5/96

(954)344-7974

Date

Daytime Phone #

CR2E034 (12/95)