

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

APPROVED
AND
FILED

96 MAY -1 AM 10:53

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # M77583

1. Corporation Name

Katzoff Development Corp.

Principal Place of Business

Mailing Address

300001803533
-05/01/96--01090--016
****208.75 ****208.75

2. Principal Place of Business

21 FDIC- 100 Colony Sq. Box 68

Suite, Apt. #, etc.

22 Ste. 2200

City & State

23 Atlanta, GA

Zip

24 30361

Country

25 USA

2a. Mailing Address

26 FDIC-100 Colony Sq. Box 68

Suite, Apt. #, etc.

27 Ste. 2200

City & State

28 Atlanta, GA

Zip

29 30361

Country

30 USA

3. Date Incorporated or Qua Fed

4-22-88

3a. Date of Last Report

4-13-95

4. FEI Number

65-0046756

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. 199.03,
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324

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)

(Typed) Registered Agent's printed name and title, if applicable

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

D/P

1.2 NAME

Lamar V. Hallman

1.3 STREET ADDRESS

100 Colony Sq. Box 68 Ste. 2200

1.4 CITY - ST - ZIP

Atlanta, GA. 30361

2.1 TITLE

D/VP/AS

2.2 NAME

Patricia J. Ray

2.3 STREET ADDRESS

100 Colony Sq. Ste. 2200 Box 68

2.4 CITY - ST - ZIP

Atlanta, GA. 30361

3.1 TITLE

D/VP/AS

3.2 NAME

Charles P. Farrell, Jr.

3.3 STREET ADDRESS

100 Colony Sq. Box 68 Ste. 2200

3.4 CITY - ST - ZIP

Atlanta, GA. 30361

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

D/S/T

John P. Rossetti

100 Colony Sq. Box 68 Ste. 2200

Atlanta, GA. 30361

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.

SIGNATURE:

Lamar V. Hallman, President
Lamar V. Hallman

President

4/18/96 404-870-7012

Original - Please

CR2E034 (12/95)