FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 MAR -9 AM 9:17

DOCUMENT # N24348 (7)

1. Corporation Name
THE CORNELL CLUB OF THE GOLD COAST INC.

Principal Place of Business	Mailing Address
% Barbara Lawrence ~~% MR CALVIN J. LANDAU~~ ~~11900 BISCAYNE BV BISCAYNE CENTER 260~~ ~~MIAMI FL 33181~~ 1401 NE NINTH STREET #3 FTLAUDERDALE FL 33304	% MR CALVIN J. LANDAU 11900 BISCAYNE BV BISCAYNE CENTER 260 MIAMI FL 33181

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 01/13/1988	3a. Date of Last Report: 01/24/1994
4. FEI Number: 65-0037866	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
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☒	$68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No	

2. Principal Place of Business	2a. Mailing Address
21 Street: 1401 NE NINTH ST	26 Street: SAME
22 Suite, Apt. #, etc.: #3	27 Suite, Apt. #, etc.:
23 City & State: FT LAUDERDALE FL	28 City & State:
24 Zip: 33304 25 Country: USA	29 Zip: 30 Country:

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
~~LANDAU, CALVIN MR.~~ ~~11900 BISCAYNE BLVD BISCAYNE CENTER 260~~ ~~MIAMI FL 33181~~	81 Name: Barbara Lawrence 82 Street Address (P.O. Box Number is Not Acceptable): 1401 NE NINTH STREET #3 83 84 City: FT LAUDERDALE FL 85 Zip Code: 33304

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: Barbara A Lawrence — 2-6-95
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	PRES DREIER DELEE-RUF ☒ Change ☐ Addition
NAME	RUF, ALAN FRANCIS	1.2 NAME	
STREET ADDRESS	2455 E. SUNRISE BLVD.	1.3 STREET ADDRESS	DELETE
CITY-ST-ZIP	FT. LAUDERDALE FL	1.4 CITY-ST-ZIP	
TITLE	VPD	2.1 TITLE	TD ☒ Change ☐ Addition
NAME	DREIER, NANCY	2.2 NAME	DREIER, NANCY
STREET ADDRESS	1292 TERRYSTONE COURT	2.3 STREET ADDRESS	1292 TERRYSTONE COURT
CITY-ST-ZIP	FT. LAUDERDALE FL	2.4 CITY-ST-ZIP	FT LAUD FL 33326
TITLE	SD	3.1 TITLE	TD ☒ Change ☒ Addition
NAME	SEIBERT, JOHN	3.2 NAME	BARBARA LAWRENCE
STREET ADDRESS	2035 N.E. 31ST AVE.	3.3 STREET ADDRESS	1401 NE 9TH ST #3
CITY-ST-ZIP	FT. LAUDERDALE FL	3.4 CITY-ST-ZIP	FT LAUD FL 33304
TITLE	TD	4.1 TITLE	VPD ☒ Change ☐ Addition
NAME	ORKIN, IRVING	4.2 NAME	GERRY CLINTON
STREET ADDRESS	4930 SABAL PALM BLVD. E	4.3 STREET ADDRESS	892 SW 9TH ST, CIRCLE 12
CITY-ST-ZIP	TAMARAC FL	4.4 CITY-ST-ZIP	BOCA RATON FL 33486
TITLE		5.1 TITLE	SD ☐ Change ☒ Addition
NAME		5.2 NAME	JEFF GAINES
STREET ADDRESS		5.3 STREET ADDRESS	327 PLAZA REAL, STE 321
CITY-ST-ZIP		5.4 CITY-ST-ZIP	BOCA RATON FL 33432
TITLE		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 is voluntarily furnished and 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Barbara A Lawrence — 2-22-95 — 305-525-7524
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL OR BY TRUSTEE — Date — Daytime Phone #

004498