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FILED
Jun 24 1997 8:00am
Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # N48229 (1)

1. Corporation Name

CORAL SPRINGS CITY CENTRE, INC.



Principal Place of Business

Mailing Address

7000 W. PALMETTO PARK RD.
SUITE 400
BOCA RATON FL 33432

7000 W. PALMETTO PARK RD.
SUITE 400
BOCA RATON FL 33433-3425

3. Date Incorporated or Qualified
04/03/1992

3a. Date of Last Report
04/25/1996

2. Principal Place of Business

2a. Mailing Address

21 3111 Stirling Rd

Suite, Apt. #, etc.

22

City & State
23 Fort Lauderdale, FL

Zip

24 33312

Country

25 Broward

Suite, Apt. #, etc.

27

City & State
28 Fort Lauderdale, FL

Zip

29 33312

Country

30 Broward

4. FEI Number
65-0370761

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

RITTER, STACY J
4976 N.W. 110TH TERRACE
CORAL SPRINGS FL 33076

81 Name
Allen M. Levine

82 Street Address (P.O. Box Number is Not Acceptable)
3111 Stirling Rd.

83

84 City
Fort Lauderdale

FL

85 Zip Code
33312

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0502, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title, if applicable

(NOTE: Registered Agent's signature required when replacing person)

DATE

6-18-97

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D ☒ DELETE
NAME RUF, ROBERT
STREET ADDRESS 6841 N.W. 4TH COURT
CITY-ST-ZIP PLANTATION FL 33317

1.1 TITLE Chair, Director ☒ Change ☒ Addition
1.2 NAME Ken Fink
1.3 STREET ADDRESS 10100 W. Sample Rd.
1.4 CITY-ST-ZIP Coral Springs, FL 33065

TITLE DT ☐ DELETE
NAME SNEDEKER, WALLACE
STREET ADDRESS 12719 N.W. 21ST PLACE
CITY-ST-ZIP CORAL SPRINGS FL

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE D ☒ DELETE
NAME URBANSKI, DENNIS
STREET ADDRESS 4961 N.W. 97TH DRIVE
CITY-ST-ZIP CORAL SPRINGS FL 33067

3.1 TITLE Vice Chair person, Director ☒ Change ☒ Addition
3.2 NAME Ginny Frystowski
3.3 STREET ADDRESS 8264 Wiles Rd.
3.4 CITY-ST-ZIP Coral Springs, FL 33067

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE Secretary, Director ☐ Change ☒ Addition
4.2 NAME Kelly Shanley
4.3 STREET ADDRESS 2855 Coral Springs Dr.
4.4 CITY-ST-ZIP Coral Springs, FL 33071

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
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 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

Allen M. Levine 6/19/97 (A.M.) 3111 Stirling Rd

CR2E037 (9/96)