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May 18 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N93000004329 (9)

1. Corporation Name

COOPER CITY COMMERCE CENTER-NORTH, INC.

Principal Place of Business

**15400 WATERMILL RD.
DAVIE FL 33331**

Mailing Address

**15400 WATERMILL RD.
DAVIE FL 33331**

3. Date Incorporated or Qualified

09/20/1993

4. FEI Number

65-0440922

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

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. Is this nonprofit corporation a homeowners association?

☐ Yes ☒ No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

**KELLY, PETER J
501 EAST KENNEDY BLVD.
STE. 1400
TAMPA FL 33602**

10. Name and Address of New Registered Agent

81 Name **Mark J. Bryn**
82 Street Address (P.O. Box Number is Not Acceptable)
One Biscayne Tower, Suite 3599
83 **2 South Biscayne Boulevard**
84 City **Miami** **FL** **85** Zip Code **33131**

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 617.0503, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

April 27, 1998

DATE

12. OFFICERS AND DIRECTORS

TITLE **DV** ☐ DELETE
NAME **CASSIDY, EUGENE F**
STREET ADDRESS **1408 NORTH WESTSHORE BLVD, SUITE 908**
CITY-ST-ZIP **TAMPA FL**

TITLE **PD** ☐ DELETE
NAME **CULVERHOUSE, HUGH F JR.**
STREET ADDRESS **ONE BISCAYNE TOWER, STE. 3599**
CITY-ST-ZIP **MIAMI FL**

TITLE **VP** ☒ DELETE
NAME **CASSIDY, EUGENE**
STREET ADDRESS **1408 NORTH WESTSHORE BLVD., STE. 908**
CITY-ST-ZIP **TAMPA FL**

TITLE **S** ☐ DELETE
NAME **TRAMONTANO, LILLIAN**
STREET ADDRESS **1408 NORTH WESTSHORE BLVD. SUITE 908**
CITY-ST-ZIP **TAMPA FL**

TITLE **D** ☐ DELETE
NAME **CAPPELLO, ANDREW N**
STREET ADDRESS **100 NORTH TAMPA STREET, STE. 3000**
CITY-ST-ZIP **TAMPA FL**

TITLE **D** ☐ DELETE
NAME **PURCELL, THOMAS K**
STREET ADDRESS **225 WATER STREET, STE. 1235**
CITY-ST-ZIP **JACKSONVILLE FL**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE **V,T** ☒ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS **3903 Northdale Boulevard, Suite 140E**
1.4 CITY-ST-ZIP **Tampa, Florida 33624**

2.1 TITLE **Senior V** ☐ Change ☒ Addition
2.2 NAME **John C. Strickroot, Jr.**
2.3 STREET ADDRESS **2 South Biscayne Boulevard, Suite 3599**
2.4 CITY-ST-ZIP **Miami, Florida 33131**

3.1 TITLE **V,S** ☐ Change ☒ Addition
3.2 NAME **Scott Lynch**
3.3 STREET ADDRESS **3903 Northdale Boulevard, Suite 140E**
3.4 CITY-ST-ZIP **Tampa, Florida 33624**

4.1 TITLE **Assist.Sect., Assist.Treas.** ☒ 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 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:

April 27, 1998

(305) 371-3600

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone # **0037974**

CR2E037 (10/97)