

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



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

FILED
May 01 1996 8:00 am
Secretary of State

DOCUMENT # **N94000004011 (2)**

1. Corporation Name

COORDINATED CONTRACTING CORPORATION



Principal Place of Business

Mailing Address

9960 CENTRAL PARK BLVD. SOUTH
SUITE 201
BOCA RATON FL 33428

9960 CENTRAL PARK BLVD. SOUTH
SUITE 201
BOCA RATON FL 33428

3. Date Incorporated or Qualified
08/16/1994

3a. Date of Last Report
10/27/1995

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

24

25

29

30

4. FEI Number

65-0560060

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

COLEMAN, IRA J
MCDERMOTT WILL & EMERY
201 S. BISCAYNE BLVD.
MIAMI FL 33131

81 Name

DAVID PARISH

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

200 EAST BROWARD BLVD.

83

Suite 1500

84 City

FT LAUDERDALE

FL

85 Zip Code

33301

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 **DAVID PARISH**

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 **D** ☐ DELETE
NAME **LERNER, HOLLY**
STREET ADDRESS **% 9960 CENTRAL PARK BLVD. S., STE. 201**
CITY-ST-ZIP **BOCA RATON FL 33428**

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

TITLE **D** ☐ DELETE
NAME **FREEMAN, RICHARD**
STREET ADDRESS **% 9960 CENTRAL PARK BLVD. S., STE. 201**
CITY-ST-ZIP **BOCA RATON FL 33428**

2.1 TITLE ☒ Change ☐ Addition
2.2 NAME **GOLD, RICHARD**
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE **D** ☒ DELETE
NAME **BARTLETT, JOHN**
STREET ADDRESS **% 9960 CENTRAL PARK BLVD. S., STE. 201**
CITY-ST-ZIP **BOCA RATON FL 33428**

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE **D** ☐ DELETE
NAME **GOLDSTEIN, MITCHELL**
STREET ADDRESS **% 9960 CENTRAL PARK BLVD. S., STE. 201**
CITY-ST-ZIP **BOCA RATON FL 33428**

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE **D** ☐ DELETE
NAME **KLOTZ, EDWARD**
STREET ADDRESS **% 9960 CENTRAL PARK BLVD. S., STE. 201**
CITY-ST-ZIP **BOCA RATON FL 33428**

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

TITLE **D** ☐ DELETE
NAME **ROSENKRANTZ, CARL**
STREET ADDRESS **% 9960 CENTRAL PARK BLVD. S., STE. 201**
CITY-ST-ZIP **BOCA RATON FL 33428**

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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/12/96

407-482-3327
Daytime Phone #

CR2E037 (12/95)