

**2008 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 21, 2008 08:00 A
Secretary of State

DOCUMENT # N94000005320

1. Entity Name
CORAL RIDGE MALL MERCHANTS' ASSOCIATION, INC.



Principal Place of Business
**%GUMBERG ASSET MANAGEMENT CORP.
3200 N FEDERAL HIGHWAY
FT LAUDERDALE, FL 33306**

Mailing Address
**%GUMBERG ASSET MANAGEMENT CORP.
3200 N FEDERAL HIGHWAY
FT LAUDERDALE, FL 33306**



03102008 No Chg-NP CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0531326

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional
Fee Required

6. Name and Address of Current Registered Agent

**ALLEN, RICHARD L
100 SE 2ND STREET
21ST FLOOR
MIAMI, FL 33131**

**DO NOT WRITE
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2008**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
FOX, GLENN
3200 N FEDERAL HIGHWAY
FT LAUDERDALE, FL 33306**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
HOLLAND, TOBY
3200 N FEDERAL HIGHWAY
FT LAUDERDALE, FL 33306**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
MICHEAU, JUDITH
3200 N FEDERAL HIGHWAY
FT LAUDERDALE, FL 33306**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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04/07/08-80032-025 61.25

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: ✓

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/25/08

Date

(954) 537-2700

Daytime Phone #

Ext 603