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NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # N96000001539

1. Corporation Name

QUAD OFFICE PARK ASSOCIATION, INC.

Principal Place of Business

% BRENNER REAL ESTATE  
3195 N. POWERLINE RD., STE 104  
POMPANO BEACH FL 33069

Mailing Address

% BRENNER REAL ESTATE  
3195 N. POWERLINE RD., STE 104  
POMPANO BEACH FL 33069



2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 30

3. Date Incorporated or Qualified

03/20/1996

4. FEI Number  
65-0405799

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

9. Name and Address of Current Registered Agent

BRENNER, SCOTT F  
C/O BRENNER REAL ESTATE GROUP  
3195 NORTH POWERLINE ROAD, SUITE 104  
POMPANO BEACH FL 33069

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

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)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD ☒ DELETE  
NAME GOLDSTEIN, JAMES E  
STREET ADDRESS 5825 N.W. 42 WAY  
CITY-ST-ZIP BOCA RATON FL 33458

TITLE STD ☒ DELETE  
NAME SMITH, CHRISTINE  
STREET ADDRESS 5825 N.W. 42 WAY  
CITY-ST-ZIP BOCA RATON FL 33458

TITLE D ☒ DELETE  
NAME SIEGEL, LEONARD  
STREET ADDRESS 3350 N.W. BOCA RATON BLVD, STE A-44  
CITY-ST-ZIP BOCA RATON FL 33431

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PD ☒ Change ☒ Addition  
1.2 NAME Scott F. Brenner  
1.3 STREET ADDRESS 3195 N. Powerline Road  
1.4 CITY-ST-ZIP Pompano Beach FL 33069

2.1 TITLE VPD ☒ Change ☒ Addition  
2.2 NAME Brian Horowitz  
2.3 STREET ADDRESS 3195 N. Powerline Road  
2.4 CITY-ST-ZIP Pompano Beach FL 33069

3.1 TITLE STD ☒ Change ☐ Addition  
3.2 NAME GEORGE PINCUS  
3.3 STREET ADDRESS 2255 Blades Road - Suite 340  
3.4 CITY-ST-ZIP Boca Raton FL 33431

4.1 TITLE ☐ 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, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/20/99

Date

(954) 978-9968

Daytime Phone #

CR2E037 (11/98)