


FILE NOW: FILING FEE IS \$61.25

**FILED**  
**Mar 31, 1999 8:00 am**  
**Secretary of State**

03-31-1999 90021 043 \*\*\*\*61.25

<b>NONPROFIT CORPORATION ANNUAL REPORT 1999</b>		FLORIDA DEPARTMENT OF STATE <b>Katherine Harris</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # N96000005109**

1. Corporation Name

**JOINT VENTURE SOUTH FLORIDA, INC.**

Principal Place of Business

21857 HIGH PINE TRAIL  
BOCA RATON FL 33428

Mailing Address

21857 HIGH PINE TRAIL  
BOCA RATON FL 33428



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 10/04/1996	
21 Suite, Apt. #, etc.	22 City & State	26 Suite, Apt. #, etc.	27 City & State	4. FEI Number 65-0719972	
23 Zip	25 Country	28 Zip	30 Country	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent	
UELZEN, ROGER F 21857 HIGH PINE TRAIL BOCA RATON FL 33428				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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
12. OFFICERS AND DIRECTORS					
TITLE	D	<input type="checkbox"/> DELETE			
NAME	BUSH, JEB				
STREET ADDRESS	21857 HIGH PINE TRAIL				
CITY-ST-ZIP	BOCA RATON FL 33428				
TITLE	CD	<input type="checkbox"/> DELETE			
NAME	COHEN, STEVEN				
STREET ADDRESS	21857 HIGH PINE TRAIL				
CITY-ST-ZIP	BOCA RATON FL 33428				
TITLE	CD	<input type="checkbox"/> DELETE			
NAME	RUSH, DAVID H				
STREET ADDRESS	21857 HIGH PINE TRAIL				
CITY-ST-ZIP	BOCA RATON FL 33428				
TITLE	D	<input type="checkbox"/> DELETE			
NAME	CARBERRY, ROBERT				
STREET ADDRESS	21857 HIGH PINE TRAIL				
CITY-ST-ZIP	BOCA RATON FL 33428				
TITLE	D	<input type="checkbox"/> DELETE			
NAME	GERBER, PETER				
STREET ADDRESS	21857 HIGH PINE TRAIL				
CITY-ST-ZIP	BOCA RATON FL 33428				
TITLE	PD	<input type="checkbox"/> DELETE			
NAME	UELZEN, ROGER F				
STREET ADDRESS	21857 HIGH PINE TRAIL				
CITY-ST-ZIP	BOCA RATON FL 33428				
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12					
1.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
1.2 NAME					
1.3 STREET ADDRESS					
1.4 CITY-ST-ZIP					
2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
2.2 NAME					
2.3 STREET ADDRESS					
2.4 CITY-ST-ZIP					
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
3.2 NAME					
3.3 STREET ADDRESS					
3.4 CITY-ST-ZIP					
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
4.2 NAME					
4.3 STREET ADDRESS					
4.4 CITY-ST-ZIP					
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
5.2 NAME					
5.3 STREET ADDRESS					
5.4 CITY-ST-ZIP					
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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

Date

Daytime Phone #

CR2E037 (1/1/98)

Joint Venture South Florida, Inc.  
21857 High Pine Trail  
Boca Raton, FL 33428

275620-90224-43  
N96 000005109  
Document #N96000005109

1999 Nonprofit Corporation Annual Report

ADDITION TO BLOCK 13

7.1 S/T/D  
7.2 Landis, Carolyn P.  
7.3 21857 High Pine Trail  
7.4 Boca Raton, FL 33428

16.1 D  
16.2 Morrison, Samuel F.  
16.3 21857 High Pine Trail  
16.4 Boca Raton, FL 33428

8.1 D  
8.2 Adams, Sandra Hernandez  
8.3 21857 High Pine Trail  
8.4 Boca Raton, FL 33428

17.1 D  
17.2 Moskowitz, Jo  
17.3 21857 High Pine Trail  
17.4 Boca Raton, FL 33428

9.1 D  
9.2 Butler, J. Murfree  
9.3 21857 High Pine Trail  
9.4 Boca Raton, FL 33428

18.1 D  
18.2 Pettigrew, Richard A.  
18.3 21857 High Pine Trail  
18.4 Boca Raton, FL 33428

10.1 D  
10.2 DeGrove, John M.  
10.3 21857 High Pine Trail  
10.4 Boca Raton, FL 33428

19.1 D  
19.2 Pohlman, Randolph A.  
19.3 21857 High Pine Trail  
19.4 Boca Raton, FL 33428

11.1 D  
11.2 Jurewicz, John T.  
11.3 21857 High Pine Trail  
11.4 Boca Raton, FL 33428

20.1 D  
20.2 Rabbat, Guy  
20.3 21857 High Pine Trail  
20.4 Boca Raton, FL 33428

12.1 D  
12.2 Kami, Michael  
12.3 21857 High Pine Trail  
12.4 Boca Raton, FL 33428

21.1 D  
21.2 Rowan, R. Edward  
21.3 21857 High Pine Trail  
21.4 Boca Raton, FL 33428

13.1 D  
13.2 Kozlowski, Paul G.  
13.3 21857 High Pine Trail  
13.4 Boca Raton, FL 33428

22.1 D  
22.2 Temares, M. Lewis  
22.3 21857 High Pine Trail  
22.4 Boca Raton, FL 33428

14.1 D  
14.2 Leone, Steven  
14.3 21857 High Pine Trail  
14.4 Boca Raton, FL 33428

23.1 D  
23.2 Plater-Zyberk, Elizabeth  
23.3 21857 High Pine Trail  
23.4 Boca Raton, FL 33428

15.1 D  
15.2 McGuire, Jeanie L.  
15.3 21857 High Pine Trail  
15.4 Boca Raton, FL 33428