## FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

TITLE

NAME

STREET ADDRESS CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998 DIVISION OF CO.

DOCUMENT # N9700000168 (1)

TOTAL OF FLORIDA HOLDINGS COMPANY, INC.

FILED
May 18 1998 8:00am
Secretary of State

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Addition

Change

|   |  |   |              |  | 100/4/101/01/01/101/101/101/101/101/101/                         | 888 N 88 N 8 1 13 23 2 23 2 23 24 24 25 25 25 25 25 25 25 25 25 25 25 25 25 |  |
|---|--|---|--------------|--|--|---|--|
| Principal Place of Business Mailing Address   |  |   |              |  |  |   |  |
| 701 BRICKELL AVE. STE 3000<br>MIAMN FL 33131-3209                                   |  | 701 BRICKELL AVE. STE 3000<br>MIAMI FL 33131-3209 |              | 3. Date Incorporated or Qualified 01/13/1997 |  |   |  |
|   |  |   |              |  | 4. FEI Number  | Applied For   |  |
|   |  |   |              |  | 65-0718493   | Not Applicable  |  |
|   | lace of Business   | 2a. Mailing Address                               |              |  | 5. Certificate of Status Desired                                 | \$8.75 Additional   |  |
| 21  |  | 26  |              |  | <del></del>  | Fee Required  |  |
| Suite, Apt.<br>22   | #, etc.  | Suite, Apt. #, etc.                               |              |  | 6. Election Campaign Financing Trust Fund Contribution           | \$5.00 May Be<br>Added to Fees  |  |
| City & State  | e  | City & State                                      |              |  | 7. Is this nonprofit corporation a homeown                       | ers association?  |  |
| 23  |  | 28  |              |  | Yes  | No  |  |
| Zip   | Country Zip  |   | Cou          | ntry   | 8. This corporation owes or has paid the current year Intangible |   |  |
| 24  | 25   | 29  | 30           |  | Personal Property Tax due June 30.                               | Yes No  |  |
|   | 9. Name and Address of Curren  | t Registered Agent                                |              |  | 10. Name and Address of New Registered                           | d Agent   |  |
|   |  |   | }            | 81 Name                                      |  | ł   |  |
| Sternstein, Gerald B ESQ.   |  |   |              | 82 Street Add                                | Address (P.O. Box Number is Not Acceptable)                      |   |  |
| 314 NORTH CALHOUN STREET  |  |   | ,            |  |  |   |  |
| TALLAHASSEE FL 32301  |  |   |              | 83   |  | ļ   |  |
|   |  |   | j            | 84 City                                      | FI   | 85 Zip Code   |  |
| 11. Pursuant  | to the provisions of Sections 617,050  | 2 and 617.1508. Florida Statu                     | ites, the ab | ove-named corr                               | poration submits this statement for the purpose                  |   |  |
| office or r   | egistered agent, or both, in the State<br>im familiar with, and accept the obliga  | of Florida, Such change was                       | authorized   | by the corporal                              | tion's board of directors. I hereby accept the ap                | ppointment as registered  |  |
| SIGNATURE   |  |   |              |  |  | İ   |  |
| Signature, typed or printed name of registered agent and title if applicable (NOTE: |  |   |              | Agent signature requi                        |  |   |  |
| 12.   | OFFICERS ANI   |   | 13.          |  | ADDITIONS/CHANGES TO OFFICERS AN                                 |   |  |
| TITLE   | D DE MATERIALE AND A STATE OF THE STATE OF T | ☐ DELETE  | 1.1 10       |  |  | Change Addition   |  |
| NAME  | RIMMER, KENNETH G  |   | 1.2 NA       |  |  |   |  |
| STREET ADDRESS  | 701 BRICKELL AVE. STE 3000   | )   | •            | REET ADDRESS                                 |  | ]   |  |
| CITY-ST-ZIP   | MIAMI FL 33131-3209  | DELETE  |              | Y-ST-ZIP                                     |  | Change Addition   |  |
| TITLE   | D ADDINICTON DODAN LID   | CT OFFER  | 2.1 111      | 1  |  | ☐ Cuarde ☐ Wooklob  |  |
| NAME  | ARRINGTON, ROBYN J JR<br>701 BRICKELL AVE. STE 3000  | 1   | 2.2 NA       |  |  |   |  |
| STREET ADDRESS  | MIAMI FL 33131-3209  | ,   |              | REET ADDRESS                                 |  | ł   |  |
| CITY-ST-ZIP<br>TITLE  | D  | DELETE  | 3 TIT        | TY-ST-ZIP                                    |  | Change Addition   |  |
| NAME  | NAROWITZ, RANDY  | _ >caric  | 3.2 NA       | j j  |  | C Suardo C Languagu   |  |
| STREET ADDRESS  | 701 BRICKELL AVE. STE 3000   | )   |              | REET ADDRESS                                 |  |   |  |
| CITY-ST-ZIP   | MIAMI FL 33131-3209  | •   |              | TY-ST-ZIP                                    |  | 1   |  |
| TITLE   |  | DELETE  | 4.1 TI)      |  | <del></del>  | Change Addition   |  |
| NAME  |  |   | 4, 2 N/      | 1  |  | _ ,}  |  |
| STREET ADDRESS  |  |   |              | REET ADDRESS                                 |  | Į.  |  |
| City-ST-ZIP   |  |   |              | Y-ST-ZIP                                     |  |   |  |
| TITLE   |  | DELETE  | 51 TIT       |  |  | Change Addition   |  |
| NAME  |  |   | 5.2 NA       | ME }   |  | ł   |  |
| STREET ADDRESS  |  |   | 5.3 ST       | REET ADDRESS                                 |  | }   |  |
| CiTY_ST. 7IP  |  |   | 1            | V . CT . 710                                 |  |   |  |

DELETE

£.1 TITLE

6.2 NAME 6.3 STREET ADDRESS

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.