

FILE NOW: FILING FEE IS \$61.25

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May 19 1998 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998



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

DOCUMENT # N97000000559 (1)  
1. Corporation Name  
PREFERRED DEVELOPMENT INC.



Principal Place of Business: 233 N.W. 42 TERRACE PLANTATION FL 33317  
Mailing Address: 233 N.W. 42 TERRACE PLANTATION FL 33317

3. Date Incorporated or Qualified: 01/31/1997  
4. FEI Number: 65-0719898  
Applied For: Not Applicable

2. Principal Place of Business: 21 233 N.W. 42 TERRACE PLANTATION FL 33317  
2a. Mailing Address: 26 P.O. Box 491207  
22. Suite, Apt. #, etc.  
23. City & State: 27 Ft. LAUDERDALE, FL  
24. Zip: 25 33349  
28. Country: 30 BROWARD

5. Certificate of Status Desired: \$8.75 Additional Fee Required  
6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees  
7. Is this nonprofit corporation a homeowners association?  Yes  No  
8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30.  Yes  No

9. Name and Address of Current Registered Agent  
BRYAN, RUTH  
233 N.W. 42 TERRACE  
PLANTATION FL 33317

10. Name and Address of New Registered Agent  
81 Name  
82 Street Address (P.O. Box Number is Not Acceptable)  
83  
84 City  
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		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BRYAN, RUTH	1.2 NAME	
STREET ADDRESS	233 N.W. 42 TERRACE	1.3 STREET ADDRESS	
CITY-ST-ZIP	PLANTATION FL 33317	1.4 CITY-ST-ZIP	
TITLE	SD	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	EDWARDS, PATRICK	2.2 NAME	
STREET ADDRESS	10820 N.W. 34 PLACE	2.3 STREET ADDRESS	
CITY-ST-ZIP	OORAL SPRINGS FL 33085	2.4 CITY-ST-ZIP	
TITLE	TD	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LEWIS, BARRY	3.2 NAME	
STREET ADDRESS	2708 N.W. 47 TERRACE	3.3 STREET ADDRESS	
CITY-ST-ZIP	LAUDERDALE LAKES FL 33319	3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		4.2 NAME	PATRICK LEWIS
STREET ADDRESS		4.3 STREET ADDRESS	1845 N.W. 58 AVE.
CITY-ST-ZIP		4.4 CITY-ST-ZIP	LAUDERHILL, FL. 33313
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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 on an attachment with an address.

SIGNATURE: \_\_\_\_\_ (BARRY LEWIS) 5-11-98 950-584-0177

CR2E037 (10/97)