

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

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**DOCUMENT # P02000011761**

1. Entity Name  
**BURLINGTON COAT FACTORY REALTY OF CORAL SPRINGS, INC.**



**FILED**  
**04 MAY -3 PM 5:17**

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



Principal Place of Business  
**1830 ROUTE 130 N  
C/O TAX DEPT.  
BURLINGTON, NJ 08016**

Mailing Address  
**1830 ROUTE 130 N  
C/O TAX DEPT.  
BURLINGTON, NJ 08016**

2. Principal Place of Business  
Suite, Apt. #, etc.  
City & State  
Zip Country

3. Mailing Address  
Suite, Apt. #, etc.  
City & State  
Zip Country

05052004 Chg-P CR2E034 (10/03)

4. FEI Number  
**03-0387530**

Applied For  
☐ Not Applicable

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

6. Name and Address of Current Registered Agent  
**SEALE, WADE  
% BURLINGTON COAT FACTORY  
25813 ROUTE 19 N.  
CLEARWATER, FL 34623**

7. Name and Address of New Registered Agent  
Name  
Street Address (P.O. Box Number is Not Acceptable)  
City **FL** Zip Code

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 restateing) DATE

**FILE NOW!!! FEE IS \$550.00  
Due by September 8, 2004**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP MILSTEIN, MONROE G 1830 ROUTE 130 N. BURLINGTON, NJ 08016	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	200036276332 05/13/04--01076--012 **150.00	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DSVP MILSTEIN, ANDREW 1830 ROUTE 130 N. BURLINGTON, NJ 08016	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	EVPS TAN, PAUL 1830 ROUTE 130 N. BURLINGTON, NJ 08016	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CFO LA PENTA, ROBERT 1830 ROUTE 130 N. BURLINGTON, NJ 08016	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DTVP MILSTEIN, STEPHEN 1830 ROUTE 130 N. BURLINGTON, NJ 08016	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	

12. 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 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 607, 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 Date Daytime Phone #

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## Division of Corporations

## Annual Report

Page 1

Document Number

**P02000011761**

Business Entity Name

**BURLINGTON COAT FACTORY REALTY OF CORAL SPRINGS, INC.**

FEI Number 030387530  
FEI Number Status ☐ Applied For ☐ Not Applicable ☒ Current  
Certificate of Status Desired ☐ Yes ☒ No

## Principal Place of Business

Address 1830 ROUTE 130 NORTH  
Suite, Apt. #, etc. C/O TAX DEPT.  
City, State BURLINGTON NJ  
Zip Code & Country 08016 US

## Mailing Address

Address 1830 ROUTE 130 NORTH  
Suite, Apt. #, etc. C/O TAX DEPT.  
City, State BURLINGTON NJ  
Zip Code & Country 08016 US

## Name And Address of Registered Agent

Name (Last, First, Middle, Title) SEALE WADE  
-or- RA Business Name   
Address % BURLINGTON COAT FACTORY  
Suite, Apt. #, etc. 25813 ROUTE 19 N.  
City, State CLEARWATER FL  
Zip Code & Country 34623 US

If Registered Agent (RA) is changed, the new RA must type their name in the 'Registered Agent Signature' block below. RA signature MUST be an individual name. If the RA is a business entity, an individual must sign on their behalf. A business entity cannot serve as its own RA.

Registered Agent Signature

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## Division of Corporations

## Annual Report

Page 2

Document Number

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Business Entity Name

BURLINGTON COAT FACTORY REALTY OF CORAL SPRINGS, INC.

Election Campaign Financing Trust Fund Contribution ☐ Yes ☒ No

## Officer/Director Name And Address

Title	CDP
Name (Last, First, Middle, Title)	MILSTEIN MONROE G
-or- Entity Name	
Street Address	1830 ROUTE 130 NORTH
City, State	BURLINGTON NJ
Zip Code & Country	08016 US

Title	D VP
Name (Last, First, Middle, Title)	MILSTEIN ANDREW R
-or- Entity Name	
Street Address	1830 ROUTE 130 NORTH
City, State	BURLINGTON NJ
Zip Code & Country	08016 US

Title	VP S
Name (Last, First, Middle, Title)	TANG PAUL G
-or- Entity Name	
Street Address	1830 ROUTE 130 NORTH
City, State	BURLINGTON NJ
Zip Code & Country	08016 US

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Title	CFO		
Name (Last, First, Middle, Title)	LA PENTA	ROBERT	L
-or- Entity Name			
Street Address	1830 ROUTE 130 NORTH		
City, State	BURLINGTON		NJ
Zip Code & Country	08016	US	

Title	D VP		
Name (Last, First, Middle, Title)	MILSTEIN	STEPHEN	E
-or- Entity Name			
Street Address	1830 ROUTE 130 NORTH		
City, State	BURLINGTON		NJ
Zip Code & Country	08016	US	

Title			
Name (Last, First, Middle, Title)			
-or- Entity Name			
Street Address			
City, State			
Zip Code & Country			

☐ List more than six Officers/Directors • ☒ No additional Officers/Directors to list

An individual named above must type their name in the 'Officer/Director Signature' block below. A corporate name is not allowed in this block.

Title	CFO
Officer/Director Signature	ROBERT L. LA PENTA

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