2004 FOR PROFIT CORPORATION **ANNUAL REPORT (AR)**

Mailing Address

3. Mailing Address

City & State

Zip

Suite, Apt. #, etc.

CORAL SPRINGS FL 33071

DOCUMENT # P02000132569

1. Entity Name

Principal Place of Business

CORAL SPRINGS FL 33071

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

1401 UNIVERSITY DRIVE STE 200

G.L. HOMES OF BOYNTON BEACH XII CORPORATION

|--|

FILED May 05, 2004 8:00 am Secretary of State

05-05-2004 90243 043 ***150.00



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

FILE NOW!!! FEE IS \$150.00

Country

GRANT, MARK F ESQ

FT LAUDERDALE FL 33301

6. Name and Address of Current Registered Agent

200 EAST BROWARD BLVD 15TH FLOOR

(NOTE: Registered Agent signature required when reinstating)

After May 1, 2004 Fee will be \$550.00 Make Check Payable to Florida Department of State

Signature, typed or printed name of registered agent and title if applicable.

9. Election Campaign Financing Trust Fund Contribution.

DATE

\$5.00 May Be Added to Fees

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10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11						
TITLE	PD	Delete	TITLE	V	,	,		Change	Addition
NAME	EZRATTI, ITZHAK		NAME	MeNeN	dez,	Nil	nAR i Q		-
STREET ADDRESS	1401 UNIVERSITY DR STE 200		STREET ADDRESS	1401	UNIV	ERSIT	Y DR	#200	
City-St-ZIP	CORAL SPRINGS FL 33071		CITY-ST-ZIP	CORal	5 P.	RINGS	FL	#200 3307/	
TITLE	V	☐ Delete	TITLE		•	. .	-	☐ Change	☐ Addition
NAME	NORWALK, RICARD M		NAME	1					
STREET ADDRESS	1401 UNIVERSITY DR STE 200		STREET ADDRESS						-
CITY-ST-ZIP	CORAL SPRINGS FL 33071		CITY-ST-ZIP						
TITLE	VT	☐ Delete	TITLE					Change	Addition
NAME	COSTELLO, RICHARD A		NAME	į					
STREET ADDRESS	1401 UNIVERSITY DR STE 200		STREET ADDRESS						
CITY-ST-ZIP	CORAL SPRINGS FL 33071		CITY-ST-ZIP						
TITLE	VAS	☐ Delete	TITLE					☐ Change	Addition
NAME	FANT, ALAN T		NAME						
STREET ADDRESS	1401 UNIVERSITY DR STE 200		STREET ADDRESS						
CITY-ST-ZIP	CORAL SPRINGS FL 33071		CITY-ST-ZIP	1					
TITLE	S	☐ Delete	TITLE				W	☐ Change	☐ Addition
NAME	CORBAN, PAUL		NAME						
STREET ADDRESS	1401 UNIVERSITY DR STE 200		STREET ADDRESS						
CITY-ST-ZIP	CORAL SPRINGS FL 33071		CITY-ST-ZIP						
TITLE		☐ Delete	TITLE			•		☐ Change	Addition
NAME			NAME	ļ					
STREET ADDRESS			STREET ADDRESS						
CITY-ST-ZIP			CITY-ST-ZIP						

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. Maria Menendez, Vice President

SIGNATURE: