

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 01, 2003 8:00 am**  
**Secretary of State**

05-01-2003 90136 041 \*\*\*150.00

**DOCUMENT # P02000132573**

1. Entity Name

**G.L. HOMES OF BOYNTON BEACH XIV CORPORATION**



Principal Place of Business  
**1401 UNIVERSITY DRIVE STE 200  
CORAL SPRINGS FL 33071**

Mailing Address  
**1401 UNIVERSITY DRIVE STE 200  
CORAL SPRINGS FL 33071**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

☒ Applied For  
☐ Not Applicable

5. Certificate of Status Desired

☐ **\$8.75 Additional  
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**GRANT, MARK F ESQ**  
**200 EAST BROWARD BLVD 15TH FLOOR**  
**FT LAUDERDALE FL 33301**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

8. The undersigned hereby certifies 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.

**CORAL SPRINGS FL 33071**

**CORAL SPRINGS FL 33071**

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating.)

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2003 Fee will be \$550.00**  
**Make Check Payable to Florida Department of State**

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	<input type="checkbox"/> Delete
	GRANT, MARK F ESQ	200 EAST BROWARD BLVD 15TH FLOOR	FT LAUDERDALE FL 33301	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
DP	EZRATTI, ITZHAK	1401 UNIVERSITY DR STE 200	CORAL SPRINGS FL 33071	<input type="checkbox"/>	<input checked="" type="checkbox"/>
	NORWALK, RICHARD M.	1401 UNIVERSITY DR STE 200	CORAL SPRINGS FL 33071	<input type="checkbox"/>	<input checked="" type="checkbox"/>
VI	LOSTELLO, RICHARD A.	1401 UNIVERSITY DR STE 200	CORAL SPRINGS FL 33071	<input type="checkbox"/>	<input checked="" type="checkbox"/>
VAS	FANT, ALAN J.	1401 UNIVERSITY DR STE 200	CORAL SPRINGS FL 33071	<input type="checkbox"/>	<input checked="" type="checkbox"/>
S	CORBAN, PAUL	1401 UNIVERSITY DR STE 200	CORAL SPRINGS FL 33071	<input type="checkbox"/>	<input checked="" type="checkbox"/>
				<input type="checkbox"/>	<input checked="" type="checkbox"/>

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 REQUIRED**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**Richard M. Norwalk, V.P.**

**April 29, 2003**

**954.753.1730**

Date

Daytime Phone #