**PROFIT CORPORATION** ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS** 

## DOCUMENT # P02379

1. Corporation Name

ROUSE-JACKSONVILLE, INC.

Principal Place	e of Business	Mailing Address	Mailing Address					
% SZYMANSKI. JOHN J. 10275 LITTLE PATUXENT PARKWAY COLUMBIA MD 21044		% SZYMANSKI. JOHN J. 10275 LITTLE PATUXENT PARKWAY COLUMBIA MD 21044		DO NOT WRITE IN THIS SPACE				
						3. Date Incorporated or Qualifed		
					ļ	06/12/1984		_}
2. Principal Pl	ace of Business	THE ROUSE COMPA	NV			1. FEI Number	A	pplied For
		_ C/O TAX DEPARTMENT				52-1317712	N	lot Applicable
Suite, Apt. #, etc.						\$8.75	Additional	
2		10275 LITTLE PATUXENT PARKWAY			WAY	5. Certifcate of Status Desired	Fee R	tequired
City & State		COLUMBIA, MARYLAND 21044				6. Election Campaign Financing	\$5.00	May Be
3					Trust Fund Contribution Added to Fees			
Zip Country		Zip Country			8. This corporation owes the current year	Intangible		
4	25 29 30		0			Personal Property Tax.	∐Yes □No	
	9. Name and Address of Current					10. Name and Address of New Registers	d Agent	
			81	Name	;			
CORPORATION SERVICE COMPANY				82 Street Address (P.O. Box Number is Not Acceptable)				
1201	HAYS STREET		82	Stree	Addres	38 (P.O. Box Number is Not Acceptable)		
	AHASSEE FL 32301-2525		83	3				
			84	City			. 85 Zip	Code
				,		<u>_</u> F	· <b>L</b>	
agent. I a	m familiar with, and accept the obligat	nons of, Section 607.0505, Florid	a Statute	S.		ration submits this statement for the purpose o's board of directors. I hereby accept the app	oointment as r	egistered
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registe				nt signature	required v	ADDITIONS/CHANGES TO OFFICERS	AND DIRECT	ORS IN 12
12.			13.		-T ·	ADDITIONS/CHANGES TO OFFICERS	Change	
TITLE	VP	□ pere ie	1.1 TITLE					
NAME	YUNGMANN, GEORGE L.		1 2 NAME					
STREET ADDRESS	%10275 LITTLE PATUXENT		1	T ADDRES	5			
CITY-ST-ZIP	COLUMBIA MD	D DELETE	1.4 CITY-	ST-ZIP			Change	Addition
TITLE	<b>S</b>	☐ DELETE	2.1 TITLE				☐ Change	
NAME	ROTHSCHILD, BRUCE I		2.2 NAME					
STREET ADDRESS	10275 LITTLE PATUXENT PK		2.3 STREI	ET ADDRES	S			
CITY-ST-ZIP	COLUMBIA MD		2.4 CITY-	ST-ZIP				- Addition
TITLE	P	☐ DELETE	3.1 TITLE				Change	Addition
NAME	DEERING, ANTHONY W.		3.2 NAME					
STREET ADDRESS	%10275 LITTLE PATUXENT		3.3 STRE	ET ADDRES	s			
CITY-ST-ZIP	COLUMBIA MD		3.4. CITY-	ST-ZIP				
TITLE	VT	☐ DELETE	4.1 TITLE				Change	Addition
NAME	DONAHUE, JEFFREY H.		4. 2 NAME	Ē				
STREET ADDRESS	%10275 LITTLE PATUXENT		4.3 STRE	ET ADDRES	s			
CITY-ST-ZIP	COLUMBIA MD	<i>J</i>	4.4 CITY-	ST-ZIP				
TITLE	V	DELETE	5.1 TITLE		VP	TO DETU A LILI LINGER	☐ Change	Addition
NAME	SZYMANSKI, JOHN J.	,	5.2 NAME		EL	IZABETH A HULLINGER		
STREET ADDRESS			5.3 STRE	ET ADDRES	102	275 LITTLE PATUXENT PKWY		
CITY-ST-ZIP	COLUMBIA MD		5.4 CITY-	ST-ZIP	CO	DLUMBIA, MD 21944		
TITLE	EVP	☐ DELETE	6.1 TITLE		_  -		Change	☐ Addition
NAME	MCGREGOR, DOUGLAS A.		6.2 NAME					
			6.3 STRE	ET ADDRES	s			
OTHER PROPERTY	LIONA CHINE I MI OMENI I INT	•			1			

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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered. 410-992-6000 **ELIZABETH A HULLINGER** 

6.4 CITY-ST-ZIP

**COLUMBIA MD** 

CITY-ST-ZIP

May 05, 1999 8:00 am Secretary of State

05-05-1999 90176 012 \*\*\*150.00