PROFIT ... CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P02380

DEERING, ANTHONY W.

COLUMBIA MD

%10275 LITTLE PATUXENT

NAME

STREET ADDRESS

CITY-ST-ZIP

1. Corporation Name

ROUSE-MIAMI, INC.

					.
Principal Place	e of Business	Mailing Address		7 1001100111110011001110011100111001110	
SZYMANSKI. JOHN J. 10275 LITTLE PATUXENT PARKWAY COLUMBIA MD 21044		SZYMANSKI, JOHN. J. 10275 LITTLE PATUXENT PARKWAY COLUMBIA MD 21044 US		DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed	
		09		06/12/1984	
3 Oringinal Pi	lose of Rusiness	THE ROUSE COMPA	NY	4. FEI Number	Applied For
2. Principal Place of Business		C/O TAX DEPARTMENT		52-1163652	Not Applicable
Suite, Apt.	# etc.	10275 LITTLE PATU	KENT PARKWA	Υ	\$8.75 Additional
22	n, oto.	COLUMBIA, MARYL		5. Certifcate of Status Desired	Fee Required
City & State	e	_ ,		Election Campaign Financing	\$5.00 May Be
23		40		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes the current year	
24	25	29 3	0	Personal Property Tax.	☐ Yes ☐ No
	9. Name and Address of Curre	nt Registered Agent	81 Name	10. Name and Address of New Registere	d Agent
COB	PORATION SERVICE COMPANY	,	81 Name		
1201 HAYS STREET			82 Street Add	ress (P.O. Box Number is Not Acceptable)	
	AHASSEE FL 32301-2525		83		
INCL	DAINOOLL I E OLOGI LOCO		65		
			84 City	F	85 Zip Code
44 Domestant	to the provisions of Sections 607 050	02 and 607 1508 Florida Statutes	the above-named cor	poration submits this statement for the nurnose	of changing its registered
office or r	egistered agent, or both, in the State	e of Florida. Such change was auti	norized by the corporal	tion's board of directors. I hereby accept the app	ointment as registered
agent. I a	m familiar with, and accept the obliga	ations of, Section 607.0505, Florid	a Statutes.		
SIGNATURE	Signature, typed or printed name of registered age	ent and title if applicable. (NOTE R	egistered Agent signature requi	red when reinstating) DATE	
12.		ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS	
TITLE	VP	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	MCGREGOR, DOUGLAS		1.2 NAME		
STREET ADDRESS	10275 LITTLE PATUXENT		1.3 STREET ADDRESS		
CITY-ST-ZIP	COLUMBIA MD		1.4 CITY-ST-ZIP		
TITLE	S	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	ROTHSCHILD, BRUCE I		2.2 NAME		
STREET ADDRESS	10275 LITTLE PATUXENT PK		2.3 STREET ADDRESS		
CITY-ST-ZIP	COLUMBIA MD		2. 4 CITY-ST-ZIP		
TITLE	VT	☐ DELETE	3,1 TITLE		☐ Change ☐ Addition
NAME	DONAHUE, JEFFREY H.		3.2 NAME		
STREET ADDRESS	%10275 LITTLE PATUXENT		3.3 STREET ADDRESS		
CITY-ST-ZIP	COLUMBIA MD		3.4. CITY-ST-ZIP	ZD.	Characa Addition
TITLE	VP	DELETE	4.1 III LL	VP ELIZABETH A HULLINGER	☐ Change Addition
NAME	SZYMANSKI, JOHN J.		4. 2 IWWE	10275 LITTLE PATUXENT PKWY	
STREET ADDRESS	10275 LITTLE PATUXENT PKW	Y	7.0 0 11 (CC17 EDE 12 CO		
CITY-ST-ZIP	COLUMBIA MD		4.4 CITT-31-ZIF	COLUMBIA, MD 21044	Change Addition
TITLE	VP		5.1 TITLE		□ Change □ Addition
NAME	YUNGMANN, GEORGE L		5.2 NAME		
STREET ADDRESS	%10275 LITTLE PATUXENT		5.3 STREET ADDRESS		
CITY-ST-ZIP	COLUMBIA MD	□ DELETE	5.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE	0				

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 SIGNATURE: CLIZABETH A HULLINGER
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNAL OFFICER OR DIRECTOR

6.3 STREET ADDRESS

FILED May 05, 1999 8:00 am Secretary of State

05-05-1999 90176 015 ***150.00