

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Barbara B. Murrain
Secretary of State
DIVISION OF CORPORATIONS

**APPROVED
AND
FILED**

95 MAY 11 AM 10:35

DOCUMENT # P02535 (3)

To: Corporation Name:

LAKE SUCCESS REALTY INVESTORS, INC.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business:

**120 2 45TH STREET
24TH FLOOR
NEW YORK NY 10036-4003
US**

Mailing Address:

**C/O FELDMAN EQUITIES
120 W 45TH STREET
NEW YORK NY 10036**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
06/26/1984

3a. Date of Last Report
03/08/1994

2. Principal Place of Business:

21

2a. Mailing Address:

26

4. FID Number
11-2647917

Applied For
Not Applicable

22. State, Apt. #, etc.

22

26. State, Apt. #, etc.

27

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

23. City & State

23

28. City & State

28

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

24

25

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8. This corporation has liability for a complete tax under 52-1195005 Florida Statutes. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324**

81. Name

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

83

84. City

FL

85

App. Code

11. Pursuant to the provisions of Sections 601.01(2)(b) and 601.12(2)(b) Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent or both in the State of Florida. Such change was authorized by the corporation's board of directors, if newly created, or by the appointment as registered agent. I am further willing and accept the obligations of Sections 601.01(2)(b) Florida Statutes.

SIGNATURE

Signature of Officer or Director of the Corporation

Signature of New Agent or the Corporation (optional)

2/9

12. OFFICERS AND DIRECTORS

13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS (12)

NAME	PD FELDMAN, IRVING 241 KINGS POINT ROAD KINGS POINT NY 11024
NAME	SD FELDMAN, EDWARD 120 WEST 45TH STREET, 24TH FLOOR NEW YORK NY
NAME	TD FELDMAN, LAWRENCE 120 WEST 45TH STREET, 8TH FLOOR NEW YORK NY 11771
NAME	
NAME	
NAME	
NAME	
NAME	
NAME	

1. NAME	☐ Change ☐ Addition
2. NAME	
3. NAME	☐ Change ☐ Addition
4. NAME	
5. NAME	☐ Change ☐ Addition
6. NAME	
7. NAME	☐ Change ☐ Addition
8. NAME	
9. NAME	☐ Change ☐ Addition
10. NAME	
11. NAME	☐ Change ☐ Addition
12. NAME	
13. NAME	☐ Change ☐ Addition
14. NAME	
15. NAME	☐ Change ☐ Addition
16. NAME	
17. NAME	☐ Change ☐ Addition
18. NAME	
19. NAME	☐ Change ☐ Addition
20. NAME	

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.01(2)(b) Florida Statutes. Further, I certify that the information included on this annual report or biennial 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 incorporator or founder of the corporation, or a person authorized to execute this report as required by Chapter 601, Florida Statutes, and that my name appears on Block 1, or Block 1A, of the report or certificate of incorporation and articles.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR