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PROFIT CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # P23020

1. Corporation Name

(1)

HELMSLEY DEVELOPMENT CORPORATION

Principal Place of Business Mailing Address 877 EXECUTIVE CENTER DR. W. POST OFFICE BOX 22095 SUITE 303 ST. PETERSBURG FL 33742 ST. PETERSBURG FL 33702									
					 Date incorporated or Qualifie 02/16/1989 		oate of Last 02/20/19		
2. Principal Pl []	lace of Business	2a. Mailing Address 26			4. FEI Number 59-2916905			Applied For Not Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired			\$8.75 Additional	
	City & State		City & State		6. Election Campaign Financing			e Required .00 May Be	
] Ζφ	Country	28	Count		Trust Fund Contribution		Add	led to Fees	
1	25	29	Gount 30	ry	8. This corporation has liability for Florida Statutes	or intangibl∈ ′es		s 199.032,	
	9. Name and Address of Cu	irrent Registered Agent			10. Name and Address of New	/ Registere	ed Agent		
MACCAR	OA FONCOY!		8	1 Name					
	ra, ernest L. Cutive center dr. West		8	2 Street Add	bress (P.O. Box Number is Not Accept	P.O. Box Number is Not Acceptable)			
SUITE 3	03		8	3		· · · · · · · · · · · · · · · · · · ·	·		
ST. PETI	ERSBURG FL 33702		8	4 City			85	Zip Code	
1 Pursuant i	In the provisions of Sections 607.6	0502 and 607 1508 Florida State	dos the ebeus	named care	pration submits this statement for the				
SIGNATURE _	Signature, systed or conflect name of registered		NOTE Registered Ag	ent signature requi	and of directors. I hereby accept the ap	DATE			
SIGNATURE _	Separative system or ported name of registered OFFICERS	Lagrent and title if any librable (f S AND DIRECTORS		ent signature requir				ORS IN 12	
SIGNATURE _	Segrature system or printed radio of registered OFFICERS	Lagrent and title if applicable (f	NOTE Registered Ag	£	ed when reinstating)				
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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.

SIGNATURE:

NATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

200/96 813-579-1200