

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P25474

1. Corporation Name

GENERAL DEVELOPMENT ACCEPTANCE CORPORATION

Principal Place of Business

LEGAL DEPT. 9TH FLOOR  
2601 S BAYSHORE DR  
MIAMI FL 33133-2461

Mailing Address

LEGAL DEPT. 9TH FLOOR  
2601 S BAYSHORE DR  
MIAMI FL 33133-2461



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/03/1989

4. FEI Number

65-0128497

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution



\$5.00 May Be  
Added to Fees

8. This corporation owes the current year Intangible  
Personal Property Tax.



Yes



No

9. Name and Address of Current Registered Agent

GOLDMAN, JOEL K  
LEGAL DEPT., 9TH FLOOR  
2601 S. BAYSHORE DRIVE  
MIAMI FL 33133

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DP  
JEFFREY THOMAS W.  
2601 S. BAYSHORE DRIVE  
MIAMI FL

TITLE ☒ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP  
VAS  
LANGLEY, MARCIA H.  
2601 S. BAYSHORE DRIVE  
MIAMI FL

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP  
VT  
FISCHER, JOHN H.  
2601 S. BAYSHORE DRIVE  
MIAMI FL

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP  
VSD  
GOLDMAN, JOEL K.  
2601 S. BAYSHORE DRIVE  
MIAMI FL

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP  
VDCS  
COOK, PAULA  
2601 S BAYSHORE DR  
MIAMI FL 33133

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP  
V  
LAGUARDIA, JOHN  
2601 S. BAYSHORE DRIVE  
MIAMI FL 33133

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

☐ Change

☐ Addition

☐ Change

☐ Addition

☐ Change

☐ Addition

☐ Change

☐ Addition

☒ Change

☐ Addition

☐ Change

☐ Addition

V/D/C/AS

Cook, Paula

2601 S. Bayshore Drive

Miami FL 33133

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.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4-9-99

305-259-4000

CR2E034 (11/98)