

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

PROFIT CORPORATION  
ANNUAL REPORT  
**1996**



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

**DOCUMENT # P92000002818 (2)**

1. Corporation Name  
**SUMMERLIN HOLDINGS, INC.**



Principal Place of Business

**1303 S MILITARY TRAIL  
SUITE 7  
DEERFIELD BEACH FL 33442  
US**

Mailing Address

**3750 PROSPECT AVENUE  
SUITE 7  
W PALM BEACH FL 33404  
US**

3. Date Incorporated or Qualified  
**11/09/1992**

3a. Date of Last Report  
**03/02/1995**

|                                 |                                      |  |   |
|---------------------------------|--------------------------------------|--|---|
| 21. Principal Place of Business | 2a. Mailing Address                  | 4. FEI Number  | Applied For   |
|                                 | <b>7788 Central Industrial Drive</b> | <b>65-0387170</b>  | Not Applicable  |
| 22. Suite, Apt. #, etc.         | 27. Suite, Apt. #, etc.              | 5. Certificate of Status Desired   | <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>      |
|                                 | <b>Suite 6</b>                       |  |   |
| 23. City & State                | 28. City & State                     | 6. Election Campaign Financing Trust Fund Contribution                                 | <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>         |
|                                 | <b>Riviera Beach, FL 33404</b>       |  |   |
| 24. Zip                         | 29. Zip                              | 8. This corporation has liability for intangible tax under s 199.032, Florida Statutes | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |
|                                 | <b>33404</b>                         |  |   |
|                                 | 30. Country                          |  |   |
|                                 | <b>US</b>                            |  |   |

9. Name and Address of Current Registered Agent

**KRAMER, SCOTT  
1155 U.S. HWY. ONE  
SUITE 205  
JUNO BEACH FL 33408**

10. Name and Address of New Registered Agent

|  |              |
|--|--------------|
| 81. Name   | 85. Zip Code |
| 82. Street Address (P.O. Box Number is Not Acceptable) | <b>FL</b>    |
| 83.  |              |
| 84. City   |              |

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 |                                 | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 |  |
|----------------------------|---------------------------------|---|--|
| TITLE                      | <input type="checkbox"/> DELETE | 1.1 TITLE   | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME                       | <b>D STRIANESE, MICHAEL</b>     | 1.2 NAME  |  |
| STREET ADDRESS             | <b>3750 PROSPECT AVE</b>        | 1.3 STREET ADDRESS                                    | <b>7788 Central Industrial Drive #6</b>                                      |
| CITY-ST-ZIP                | <b>WEST PALM BEACH FL</b>       | 1.4 CITY-ST-ZIP                                       | <b>Riviera Beach, FL 33404</b>   |
| TITLE                      | <input type="checkbox"/> DELETE | 2.1 TITLE   | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| NAME                       | <b>D CERBONE, JOHN</b>          | 2.2 NAME  |  |
| STREET ADDRESS             | <b>3750 PROSPECT AVE</b>        | 2.3 STREET ADDRESS                                    | <b>7788 Central Industrial Drive #6</b>                                      |
| CITY-ST-ZIP                | <b>WEST PALM BEACH FL</b>       | 2.4 CITY-ST-ZIP                                       | <b>Riviera Beach, FL 33404</b>   |
| TITLE                      | <input type="checkbox"/> DELETE | 3.1 TITLE   | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| NAME                       |                                 | 3.2 NAME  |  |
| STREET ADDRESS             |                                 | 3.3 STREET ADDRESS                                    |  |
| CITY-ST-ZIP                |                                 | 3.4 CITY-ST-ZIP                                       |  |
| TITLE                      | <input type="checkbox"/> DELETE | 4.1 TITLE   | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| NAME                       |                                 | 4.2 NAME  |  |
| STREET ADDRESS             |                                 | 4.3 STREET ADDRESS                                    |  |
| CITY-ST-ZIP                |                                 | 4.4 CITY-ST-ZIP                                       |  |
| TITLE                      | <input type="checkbox"/> DELETE | 5.1 TITLE   | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| NAME                       |                                 | 5.2 NAME  |  |
| STREET ADDRESS             |                                 | 5.3 STREET ADDRESS                                    |  |
| CITY-ST-ZIP                |                                 | 5.4 CITY-ST-ZIP                                       |  |
| TITLE                      | <input type="checkbox"/> DELETE | 6.1 TITLE   | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| NAME                       |                                 | 6.2 NAME  |  |
| STREET ADDRESS             |                                 | 6.3 STREET ADDRESS                                    |  |
| CITY-ST-ZIP                |                                 | 6.4 CITY-ST-ZIP                                       |  |

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*Michael Strianese*  
**Michael Strianese** 2/16/96 407 840 0007

CR2E034 (12/95)