PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

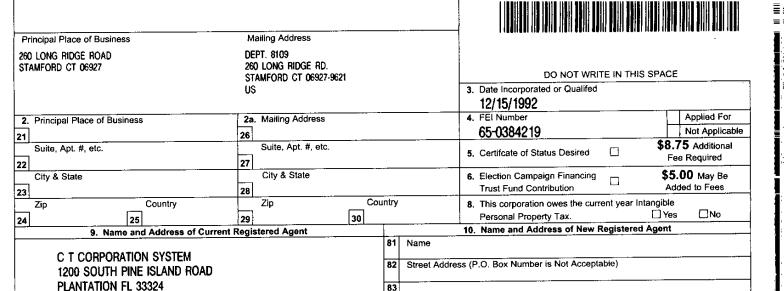
DOCUMENT # P92000011964

1. Corporation Name

FLORIDA SPANISH RIVER CENTRE, INC.

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

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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: Re	gistered Agent signature r	equired when reinstating)	DATE		
12.	OFFICERS AND DIRECTORS		13.	ADDITIONS/CHANGES TO OFF			
TITLE	ATT	LETE	1.1 TITLE	ATT Amoth	☐ Change	Addition	
NAME	SCHULMAN, GARY J	`	1.2 NAME	John male	04		
STREET ADDRESS	260 LONG RIDGE RD.		1.3 STREET ADDRESS	260 Long Riege	~ (00 7		
CITY-ST-ZIP	STAMFORD CT		1.4 CITY-ST-ZIP	John Amato John Amato 260 Long Ridge Stamford, CT	0672		
TITLE	OP 🗆	DELETE	2.1 TITLE	·	☐ Change	☐ Addition	
NAME	SASSAMAN, DENNIS		2.2 NAME				
STREET ADDRESS	499 THORNALL ST		2.3 STREET ADDRESS				
CITY-ST-ZIP	EDISON NJ 08837		2.4 CITY-ST-ZIP				
TITLE	D	DELETE	3.1 TITLE		☐ Change	Addition	
NAME	SCHIAVETTI, ALFRED J		3.2 NAME			ļ	
STREET ADDRESS	499 THORNALL ST		3.3 STREET ADDRESS				
CITY-ST-ZIP	EDISON NJ 08837		3.4. CITY-ST-ZIP				
TITLE	T	DELETE	4.1 TITLE		☐ Change	Addition	
NAME	EBBERT, DONALD W		4. 2 NAME			ļ	
STREET ADDRESS	499 THORNALL ST.		4.3 STREET ADDRESS			•	
CITY-ST-ZIP	EDISON NJ		4.4 CITY-ST-ZIP				
TITLE	\$	DELETE	5.1 TITLE		☐ Change	☐ Addition	
NAME	SPERGER, JOHN M		5.2 NAME				
STREET ADDRESS	499 THORNALL ST.		5.3 STREET ADDRESS				
CITY-ST-ZIP	EDISON NJ		5.4 CITY-ST-ZIP				
TITLE	V	DELETE	6.1 TITLE		Change	☐ Addition	
NAME	SCHERER, BRADLEY A		6.2 NAME				
STREET ADDRESS	.1601 BELVEDERE RD., #110E		6.3 STREET ADDRESS				
CITY-ST-ZIP	WEST PALM BEACH FL 33401		6.4 CITY-ST-ZIP	Charles Charles I			

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:

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4.28.99

Daytime Phone i

3R2E034 (11/98)

Zip Code

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