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

FILED
Mar 30 1996 8:00 am
Secretary of State

DOCUMENT # **P93000011269 (6)**

1. Corporation Name

ORIOLE FAIRWAY POINT, INC.

Principal Place of Business
1690 S CONGRESS AVENUE
DELRAY BEACH FL 33445

Mailing Address
1690 S CONGRESS AVENUE
DELRAY BEACH FL 33445

3. Date Incorporated or Qualified: **02/12/1993**
3a. Date of Last Report: **03/01/1995**

2. Principal Place of Business
21
Suite, Apt. #, etc.
22
City & State
23
Zip 24 Country 25

2a. Mailing Address
26
Suite, Apt. #, etc.
27
City & State
28
Zip 29 Country 30

4. FEI Number: **65-0396548** 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 has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No Affliated

9. Name and Address of Current Registered Agent

LEVY, RICHARD D
1690 S CONGRESS AVENUE
DELRAY BEACH FL 33445

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 Section 607.0505 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 _____ DATE

12. OFFICERS AND DIRECTORS

TITLE	PD	☐ DELETE
NAME	LEVY, MARK	
STREET ADDRESS	1690 S CONGRESS AVE, STE 200	
CITY-ST-ZIP	DELRAY BCH FL	
TITLE	CD	☐ DELETE
NAME	LEVY, RICHARD D	
STREET ADDRESS	1690 S CONGRESS AVE, STE 200	
CITY-ST-ZIP	DELRAY BCH FL	
TITLE	VTD	☐ DELETE
NAME	NUNEZ, ANTONIO	
STREET ADDRESS	1690 S CONGRESS AVE, STE 200	
CITY-ST-ZIP	DELRAY BCH FL	
TITLE	VD	☐ DELETE
NAME	HUBSHMAN, E. E	
STREET ADDRESS	1690 S CONGRESS AVE, STE 200	
CITY-ST-ZIP	DELRAY BCH FL	
TITLE	SD	☐ DELETE
NAME	LEVY, HARRY A	
STREET ADDRESS	1690 S CONGRESS AVE, STE 200	
CITY-ST-ZIP	DELRAY BCH FL	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE		☐ Change ☐ Addition
12 NAME		
13 STREET ADDRESS		
14 CITY-ST-ZIP		
21 TITLE		☐ Change ☐ Addition
22 NAME		
23 STREET ADDRESS		
24 CITY-ST-ZIP		
31 TITLE		☐ Change ☐ Addition
32 NAME		
33 STREET ADDRESS		
34 CITY-ST-ZIP		
41 TITLE		☐ Change ☐ Addition
42 NAME		
43 STREET ADDRESS		
44 CITY-ST-ZIP		
51 TITLE		☐ Change ☐ Addition
52 NAME		
53 STREET ADDRESS		
54 CITY-ST-ZIP		
61 TITLE		☐ Change ☐ Addition
62 NAME		
63 STREET ADDRESS		
64 CITY-ST-ZIP		

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CR2E034 (12/95)

14. I do hereby certify that the information supplied on this report is accurate, complete, and current, 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 the report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on a separate attachment, with an address.

SIGNATURE: A. Nunez, Sr. Vice President 03/28/96 (407) 274-2000

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

3-30-1996