

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 # P93000055124 (0)

1. Corporation Name

FLAGSHIP RESORT DEVELOPMENT CORPORATION



Principal Place of Business

10800 BISCAYNE BLVD
SUITE 705
MIAMI FL 33161

Mailing Address

10800 BISCAYNE BLVD
SUITE 705
MIAMI FL 33161

2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip

Country

2a. Mailing Address

26 100 S.E. Second Street
Suite, Apt. #, etc.

27 Suite 4000

City & State

28 Miami, FL

29 33131

Country

30 USA

3. Date Incorporated or Qualified

08/05/1993

3a. Date of Last Report

05/01/1995

4. FEI Number

65-0431067

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

STEVEN M. MEYERS, P.A.
ONE BISCAYNE TOWER #3550
TWO S BISCAYNE BLVD
MIAMI FL 33131

10. Name and Address of New Registered Agent

81 Name

Robert E. Dady, Esq.

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

100 S.E. Second Street, Suite 4000

83

84 City

Miami

FL

85 Zip Code

33131

11. Pursuant to the provisions of Sections 607.0502 and 607.0505, 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 is 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 607.0502, Florida Statutes.

SIGNATURE

Robert E. Dady, Esq.

DATE

7/17/96

12. OFFICERS AND DIRECTORS

TITLE D
NAME MEYERS, HILLEL A
STREET ADDRESS 4875 PINE TREE DR
CITY-ST-ZIP MIAMI BEACH FL 33140 ☐ DELETE

TITLE D
NAME KAYE, BRUCE
STREET ADDRESS 1534 NE QUAY TERRACE
CITY-ST-ZIP MIAMI FL 33138 ☐ DELETE

TITLE VP
NAME MEYERS, NEIL
STREET ADDRESS 2791 POINCIANA BLVD
CITY-ST-ZIP KISSIMMEE FL ☒ DELETE

TITLE T
NAME GOLDWYN, OWEN
STREET ADDRESS 60 NORTH MAIN AVE
CITY-ST-ZIP ATLANTIC CITY NY ☒ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE D
12 NAME Milton, Phillip
13 STREET ADDRESS 230 Park Avenue, Suite 635
14 CITY-ST-ZIP New York, New York 10169-0019 ☐ Change ☒ Addition

21 TITLE D/VP
22 NAME Keith, Marvin
23 STREET ADDRESS 230 Park Avenue, Suite 635
24 CITY-ST-ZIP New York, New York 10169-0019 ☐ Change ☒ Addition

31 TITLE D
32 NAME Weyand, Kaylynn
33 STREET ADDRESS 15 Stonebriar Way
34 CITY-ST-ZIP Frisco, Texas 75034 ☐ Change ☒ Addition

41 TITLE VP/T
42 NAME Valenti, Michael
43 STREET ADDRESS 60 North Maine Street
44 CITY-ST-ZIP Atlantic City, New Jersey ☐ Change ☐ Addition

51 TITLE
52 NAME
53 STREET ADDRESS
54 CITY-ST-ZIP ☐ Change ☐ Addition

61 TITLE
62 NAME
63 STREET ADDRESS
64 CITY-ST-ZIP ☐ Change ☐ Addition

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
Bruce Kaye

7/17/96

348-9188

CR2E034 (12/95)