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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996
DOCUMENT #
1. Corporation Name

P93000061951 (8)

G.L. HOMES OF SILVER LAKES XV CORPORATION

| Principal Place of | DUSINESS | Maling Address | | | | | | | | | | |
|---|---|--|--------------------------|--|--|-------------------------|---|--|--------------|--------------------------|---------------|-----------|
| 1401 UNIVERSITY DR SUITE 200 CORAL SPRINGS FL 33071 | | 1401 UNIVERSITY DR SUITE 200 CORAL SPRINGS FL 33071 | | | | | | | | | | |
| COHAL SPHI | INGS FL 330/1 | WHAL SPRINGS IL | 33071 | | | 3. | Date Incorporated or 09/03/1993 | Qualified | 3a. Date | of Last 04/27/ | | |
| 2. Principal Plac | e of Business | 2a. Malling Address | | | 4. FEI Number | | | | Applied For | | | |
| 1 | | 26 | | | | 65-0438798 Not Applicat | | | | | | |
| Suite, Apt. #, | etc. | Suite, Apt. #, etc. | | | 5. Certificate of Status Desired S8.75 Additional Fee Required | | | | | | | |
| 2 | | [27] | | | | | Election Campaign F | inancina | | | 00 May B | |
| City & State | | City & State | | | | В. | Trust Fund Contribut | - | | • | led to Fees | |
| 3 Zip Country | | Zip Country | | 8. | This corporation has | liability for i | ntangible ta | x under | s 199.032 | , | | |
| 25 | | 2.9 | 30 | | | | Florida Statutes | | □ No | · <u>·</u> | | |
| | 9. Name and Address of Current | Registered Agent | | | | 10. | . Name and Address | of New R | egistered | Agent | | |
| | | | | 81 | Name | | | | | | | |
| GRANT | , Mark | | | 82 | Street Address (P.O. Box Number is Not Acceptable) | | | | | | | |
| | BROWARD BOULEVARD | | - | 02 | | | | | | | | |
| ft. Lai | UDERDALE FL 33302 | | | 83 | | | | | | | | |
| | | | ļ | 84 | City | | | | FL | 85 | Zip Code | |
| | the provisions of Sections 607.0502 | J 007 4500 Florido Statut | on the cho | | amod corne | ration | eutomite this statemen | for the pu | mose of ch | anoino it | s registered | d offic |
| or registere | o the provisions of Sections 607.0502 and agent, or both, in the State of Floridan, and accept the obligations of, Section | a. Such change was authorize | ecroy me c | orpo | oration's boa | ard of c | directors. I hereby acci | ept the app | ointment as | s register | ed agent. I | anı |
| SIGNATURE _ | Signature, typied or printed name of registered agent a | out+us it mysicabio (NC | H Hanktered | Agen | L signature requir | ed when | reinstating) | | DATE | | | |
| 12. | OFFICERS AND | | 13. | | | | ADDITIONS/CHANG | ES TO OFF | ICERS AN | DIREC | TORS IN 12 | 2 |
| TITLE | PD | ☐ DELETE | 1. 1 TITLE . 1.2 NAME | | | | | | | Chang | e 🎞 Add | dition |
| NAME | EZRATTI, ITZHAK | | | | | | | | | | | |
| STREET ADDRESS | 1401 UNIVERSITY DR S200 | | 1.3 \$ | 1.3 STREET ADDRESS | | | | | | | | |
| CITY-ST-ZIP | CORAL SPRINGS FL | | 1.4 CITY - ST - Z:P | | T - Z:P | | | | | F-1 05 | . [44 | lalitia n |
| TITLE | VA | ☐ DELETE | i i | 2 1 TITLE | | | | | | Chang | e 🗌 Ad | JUILION |
| NAME | FANT, ALAN | | 2.2 N | | | | | | | | | |
| STREET ADDRESS | | 1401 UNIVERSITY DR S200 CORAL SPRINGS FL VT | | 2.3 STREET ADORESS 2.4 City-St-Zip | | | | | | | | |
| CITY-ST-ZIP | | | | | ST · ZIF | | | | | [] Chang | e ∏ Ad | dition |
| TITLE | | COSTELLO, RICHARD A | | 3 1 TITLE 3 2 NAME 3.3. STREET ADDRESS | | | | | | | | |
| NAME | 1401 UNIVERSITY DR S200 | | | | | | | | | | | |
| STREET ADDRESS | CORAL SPRINGS FL | | | 3 4 C(1Y - ST - Z)F | | | | | | | | |
| CITY-ST-ZIP TITLE | V | DELETE | | 4. 1 TITLE | | | *************************************** | ······································ | | ☐ Chan | ge 🔲 Ad | ddition |
| NAME | NORWALK, RICHARD M | _ | 4.2 N | 4.2 NAME | | | | | | | | |
| STREET ADDRESS | 1401 UNIVERSITY DR S200 |) | 438 | 4.3 STREET ADDRESS | | | | | | | | |
| CITY-ST-ZIP | CORAL SPRINGS FL | | 4.4 (| 4.4 CITY - ST - ZIP | | | | | | | | 1 1111 |
| TITLE | 8 | ☐ DELETE | 5. 1 | 5. 1 TOLE 5.2 NAME | | | | | | Chan | ge 🗀 Ao | adition |
| NAME | EZRATTI, MOSHE | | 5.21 | | | | | | | | | |
| STREET ADDRESS | 1401 UNIVERSITY DR S200 |) | 5.3 9 | TREE | 1 ADDRESS | | | | | | | |
| CITY-ST-ZIP | CORAL SPRINGS FL | | | | ST-ZIP | | | | | Chen | ge [] Ac | ddilion |
| TITLE | | DELETE. | 1 | 6 1 TITLE | | | | | | Chan | a∘ F1 v | auniti)il |
| NAME | | | | AME | | | | | | | | |
| STREET ADDRESS | | | | | T ADDRESS | | | | | | | |
| CITY-ST-ZIP | y certify that the information supplied | uth this flips is not stade to | | .1. | S1-ZIP | (for th | e exemption stated in | Section 11 | 9.07(3)(k) F | Iorida St | atutes. I fur | rther |
| 14. I do hereb certify that | ly certify that the information supplied to the information indicated on this annular an officer or director of the corport Block 12 or Block 12 if changed, or o | waranis illing is voluntarily tur Jal report or supplemental an | nua! report | is tr | ne aud accr | irale ar | nd that my signature s | hall have th | e same leg | al effect | es if made i | under |
| oath, that | Lam an officer or director-of-the coroc | ration or the receiver or trust | ee empow | ered. | to execute : | mis rer | oon as recuired by Ch | abler 607. I | แบทเมล อเสโ | utus, ark | icica C⊞y He | تکا ایس |

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

(954) 753-173

CR2E034 (12/95)