

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED

May 01 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P93000061953 (4)

1. Corporation Name

G.L. HOMES OF SILVER LAKES XIV CORPORATION



Principal Place of Business

1401 UNIVERSITY DR
SUITE 200
CORAL SPRINGS FL 33071

Mailing Address

1401 UNIVERSITY DR
SUITE 200
CORAL SPRINGS FL 33071-8908

3. Date Incorporated or Qualified

09/03/1993

3a. Date of Last Report

05/01/1996

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

GRANT, MARK
C/O RUDEN BARNETT
200 E. BROWARD BOULEVARD
FT. LAUDERDALE FL 33302

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 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 PD
NAME EZRATTI, ITZHAK
STREET ADDRESS 1401 UNIVERSITY DR., #200
CITY-ST-ZIP CORAL SPRINGS FL 33071

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

TITLE VA
NAME FANT, ALAN
STREET ADDRESS 1401 UNIVERSITY DR., #200
CITY-ST-ZIP CORAL SPRINGS FL 33071

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE VT
NAME COSTELLO, RICHARD
STREET ADDRESS 1401 UNIVERSITY DR., #200
CITY-ST-ZIP CORAL SPRINGS FL

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE V
NAME NORWALK, RICHARD
STREET ADDRESS 1401 UNIVERSITY DR., #200
CITY-ST-ZIP CORAL SPRINGS FL 33071

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE S
NAME EZRATTI, MOSTLE
STREET ADDRESS 1401 UNIVERSITY DR., #200
CITY-ST-ZIP CORAL SPRINGS FL 33071

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/15/97

954-753-1730

Daytime Phone #

0158846

CR2E034 (9/96)