

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**CORPORATION
ANNUAL REPORT
1995**



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

DOCUMENT # P94000017043 (8)

1. Corporation Name

ESI DIXIE VALLEY, INC.

Principal Place of Business

Mailing Address

**1400 CENTREPARK BLVD.
SUITE 600
W. PALM BEACH FL 33401**

**1400 CENTREPARK BLVD.
SUITE 600
W. PALM BEACH FL 33401**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

3a. Date of Last Report

03/02/1994

4. FEI Number

65-0477780

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 **See Attached**

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 Country

29 Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**LEON, J. E
9250 W. FLAGLER STREET
MIAMI FL 33174**

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, Printed or Printed Name of Registered Agent and Title if applicable)

(Signature, Printed or Printed Name of Registered Agent and Title if applicable)

(Signature)

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

D
TANCER, EDWARD F
11770 U.S. HIGHWAY 1
N. PALM BEACH FL 33408

11 TITLE
12 NAME
13 STREET ADDRESS
14 CITY, ST, ZIP

☒ Change ☐ Addition
DELETE TANCER

21 TITLE
22 NAME
23 STREET ADDRESS
24 CITY, ST, ZIP

21 TITLE
22 NAME
23 STREET ADDRESS
24 CITY, ST, ZIP

☐ Change ☒ Addition
DP
CARPENTER, LARRY K
1400 CENTREPARK BLVD, STE 600
WEST PALM BEACH FL

31 TITLE
32 NAME
33 STREET ADDRESS
34 CITY, ST, ZIP

31 TITLE
32 NAME
33 STREET ADDRESS
34 CITY, ST, ZIP

☐ Change ☒ Addition
DV
GELBER, LESLIE J
1400 CENTREPARK BLVD, STE 600
WEST PALM BEACH FL

41 TITLE
42 NAME
43 STREET ADDRESS
44 CITY, ST, ZIP

41 TITLE
42 NAME
43 STREET ADDRESS
44 CITY, ST, ZIP

☐ Change ☒ Addition
DT
MCGRATH, ROBERT L
1400 CENTREPARK BLVD, STE 600
WEST PALM BEACH FL

51 TITLE
52 NAME
53 STREET ADDRESS
54 CITY, ST, ZIP

51 TITLE
52 NAME
53 STREET ADDRESS
54 CITY, ST, ZIP

☐ Change ☒ Addition
S
CARPENTER, FRANCES M
1400 CENTREPARK BLVD, STE 600
WEST PALM BEACH, FL

61 TITLE
62 NAME
63 STREET ADDRESS
64 CITY, ST, ZIP

61 TITLE
62 NAME
63 STREET ADDRESS
64 CITY, ST, ZIP

☐ Change ☐ Addition
DP75116

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)(b), 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

FRANCES M. CARPENTER

SECRETARY

3/23/95

Date

407-687-4900

Telephone Number