FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

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

APPROVED AND FILED

95 APR 27 AM 1:42

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P94000041292 (1)**

1. Corporation Name

G.L. HOMES OF SILVER LAKES XXIV CORPORATION

800001475018
-05/04/95--01013--004
***1200.00 ****200.00
DO NOT WRITE IN THIS SPACE

Principal Place of Business	Mailing Address
1401 UNIVERSITY DRIVE SUITE 200 CORAL GABLES FL 33071	1401 UNIVERSITY DRIVE SUITE 200 CORAL GABLES FL 33071

3. Date Incorporated or Qualified: 06/02/1994
3a. Date of Last Report:

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 / County 25	Zip 29 / County 30

4. FEI Number: 65-0497301 ☐ 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

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
EZRATTI, ITZHAK 1401 UNIVERSITY DRIVE SUITE 200 CORAL GABLES FL 33071	81 Name: MARK GRANT C/O RUDEN BARNETT 82 Street Address (P.O. Box Number is Not Acceptable): 200 E. BROWARD BOULEVARD 83 84 City: FT LAUDERDALE FL 85 Zip Code: 33302

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: Mark F. Grant — 4/26/95
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	11 TITLE	☐ Change ☐ Addition
NAME	EZRATTI, ITZHAK	12 NAME	
STREET ADDRESS	1401 UNIVERSITY DRIVE, #200	13 STREET ADDRESS	
CITY-ST-ZIP	CORAL SPRINGS, FL 33071	14 CITY-ST-ZIP	
TITLE	VS	21 TITLE	☐ Change ☐ Addition
NAME	FANT, ALAN	22 NAME	
STREET ADDRESS	1401 UNIVERSITY DRIVE, #200	23 STREET ADDRESS	
CITY-ST-ZIP	CORAL SPRINGS, FL 33071	24 CITY-ST-ZIP	
TITLE	VT	31 TITLE	☐ Change ☐ Addition
NAME	COSTELLO, RICHARD A	32 NAME	
STREET ADDRESS	1401 UNIVERSITY DRIVE, #200	33 STREET ADDRESS	
CITY-ST-ZIP	CORAL SPRINGS, FL 33071	34 CITY-ST-ZIP	
TITLE	S	41 TITLE	☐ Change ☐ Addition
NAME	EZRATTI, MOSHE	42 NAME	
STREET ADDRESS	1401 UNIVERSITY DRIVE, #200	43 STREET ADDRESS	
CITY-ST-ZIP	CORAL SPRINGS, FL 33071	44 CITY-ST-ZIP	
TITLE	V	51 TITLE	☐ Change ☐ Addition
NAME	NORWALK, RICHARD M	52 NAME	
STREET ADDRESS	1401 UNIVERSITY DRIVE, #200	53 STREET ADDRESS	
CITY-ST-ZIP	CORAL SPRINGS, FL 33071	54 CITY-ST-ZIP	
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY-ST-ZIP		64 CITY-ST-ZIP	CH

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)(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: R M N — 4/26/95 — 305 253-7300
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #
Richard M. Norwalk - V.P

011943 CP