

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P94000041588

1. Corporation Name

TOWN CENTER REALTY, INC.

Principal Place of Business

1601 TOWN CENTER BLVD.  
200 E. LAS OLAS BLVD., SUITE 1900  
FT. LAUDERDALE FL 33326  
US

Mailing Address

1601 TOWN CENTER BLVD.  
200 E. LAS OLAS BLVD., SUITE 1900  
FT. LAUDERDALE FL 33326  
US

2. Principal Place of Business

21 1601 Town Center Blvd.

Suite, Apt. #, etc.

22

City & State

23 Ft. Lauderdale, FL

Zip

Country

24 33326

25

Broward

2a. Mailing Address

26 1601 Town Center Blvd.

Suite, Apt. #, etc.

27

City & State

28 Ft. Lauderdale, FL

Zip

Country

29 33326

30

Broward

9. Name and Address of Current Registered Agent

SANTOS, JOSE  
1601 TOWN CENTER BLVD.  
FT. LAUDERDALE FL 33326

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/03/1994

4. FEI Number

65-0499109

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 owes the current year Intangible

Personal Property Tax.

☐ Yes

☒ No

10. Name and Address of New Registered Agent

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

TITLE DP ☐ DELETE

NAME SANTOS, JOSE  
STREET ADDRESS 1601 TOWN CENTER BLVD.  
CITY-ST-ZIP FT. LAUDERDALE FL

TITLE DV ☐ DELETE

NAME SCHNEIDER, STEVEN  
STREET ADDRESS 1601 TOWN CENTER BLVD.  
CITY-ST-ZIP FT. LAUDERDALE FL

TITLE DST ☐ DELETE

NAME NEWMAN, MARVIN  
STREET ADDRESS 1601 TOWN CENTER BLVD.  
CITY-ST-ZIP FT. LAUDERDALE FL

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I 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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date:

Daytime Phone #

0314141

CR2023-11/08

FILED  
Apr 14, 1999 8:00 am  
Secretary of State

04-14-1999 90058 027 \*\*\*150.00

