FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT

1995 5-1-95

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

B-6658 DOCUMENT OR CORPORATION NUMBER C

APPROVED AND FILED

95 MAY -1 AM 10:15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000064250 (1)

1. Corporation Name

VF HOLLYWOOD OAKS, INC.

Principal Place of Business	Mailing Address
% BROAD & CASSEL 7777 GLADES RD., STE. 300 BOCA RATON FL 33434	% BROAD & CASSEL 7777 GLADES RD., STE. 300 BOCA RATON FL 33434

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 08/31/1994
3a. Date of Last Report:

2. Principal Place of Business (21) | 2a. Mailing Address (26)

Suite, Apt. #, etc. (22) | Suite, Apt. #, etc. (27)

City & State (23) | City & State (28)

Zip (24) Country (25) | Zip (29) Country (30)

4. FEI Number: 59-3267037 ☐ 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

DEUTCH, JEFFREY A
BROAD & CASSEL
7777 GLADES RD., STE. 300
BOCA RATON FL 33434

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 _____ DATE
Signature, typed or printed name of registered agent and the date of signature (NOTE: Registered Agent signature required when changing)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D	11 TITLE	P/S/D	☒ Change ☐ Addition
NAME	POMERANTZ, SAUL	12 NAME		
STREET ADDRESS	% 7777 GLADES RD., SUITE 300	13 STREET ADDRESS	8600 Decarie Blvd., Suite 200	
CITY ST ZIP	BOCA RATON FL 33434	14 CITY ST ZIP	Town of Mount Royal, QC H4P 2N2	
TITLE	D	21 TITLE	V/Ass't Secretary/D	☒ Change ☐ Addition
NAME	POMERANTZ, TERRY	22 NAME		
STREET ADDRESS	% 7777 GLADES RD., SUITE 300	23 STREET ADDRESS	8600 Decarie Blvd., Suite 200	
CITY ST ZIP	BOCA RATON FL 33434	24 CITY ST ZIP	Town of Mount Royal, QC H4P 2N2	
TITLE	D	31 TITLE	T/V/D	☒ Change ☐ Addition
NAME	GATTINGER, FRANK	32 NAME		
STREET ADDRESS	% 7777 GLADES RD., SUITE 300	33 STREET ADDRESS	8600 Decarie Blvd., Suite 200	
CITY ST ZIP	BOCA RATON FL 33434	34 CITY ST ZIP	Town of Mount Royal, QC H4P 2N2	
TITLE		41 TITLE		☐ Change ☐ Addition
NAME		42 NAME		
STREET ADDRESS		43 STREET ADDRESS		
CITY ST ZIP		44 CITY ST ZIP		
TITLE		51 TITLE		☐ Change ☐ Addition
NAME		52 NAME		
STREET ADDRESS		53 STREET ADDRESS		
CITY ST ZIP		54 CITY ST ZIP		
TITLE		61 TITLE		☐ Change ☐ Addition
NAME		62 NAME		
STREET ADDRESS		63 STREET ADDRESS		
CITY ST ZIP		64 CITY ST ZIP		

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 this 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: Franklin J. Gattinger April 12, 1995 (514)341-8600
SIGNATURE AND TYPED OR PRINTED NAME OF DIRECTOR OR OFFICER Date Daytime Phone #

0262429 CP