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 28 AM 9:18
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000093139 (1)

1. Corporation Name

MAGGIE ELLIOTT, INC.

Principal Place of Business: 2075 PERIWINKLE WAY, SANIBEL FL 33957

Mailing Address: 2075 PERIWINKLE WAY, SANIBEL FL 33957

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 12/27/1994
3a. Date of Last Report:
4. FEI Number: 65-0554181 — 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 is liable for intangible tax under S. 199.032 Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business: 21 ___ Suite, Apt. #, etc.: 22 ___ City & State: 23 ___ Zip: 24 ___ Country: 25 ___

2a. Mailing Address: 26 ___ Suite, Apt. #, etc.: 27 ___ City & State: 28 ___ Zip: 29 ___ Country: 30 ___

9. Name and Address of Current Registered Agent

CORPORATION INFORMATION SERVICES, INC.
1201 HAYS STREET
TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent

81 Name: Marsha L. Paplham
82 Street Address (P.O. Box Number is Not Acceptable): 2075 Periwinkle Way
83
84 City: Sanibel FL 85 Zip Code: 33957

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 ___

12. OFFICERS AND DIRECTORS

TITLE	PSTD
NAME	PAPLHAM, MARSHA L
STREET ADDRESS	2075 PERIWINKLE WAY
CITY-ST-ZIP	SANIBEL FL 33957
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. (Change / Addition)

1 TITLE	
1 NAME	
1 STREET ADDRESS	
1 CITY-ST-ZIP	
2 TITLE	
2 NAME	
2 STREET ADDRESS	
2 CITY-ST-ZIP	
3 TITLE	
3 NAME	
3 STREET ADDRESS	
3 CITY-ST-ZIP	
4 TITLE	
4 NAME	
4 STREET ADDRESS	
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5 TITLE	
5 NAME	
5 STREET ADDRESS	
5 CITY-ST-ZIP	
6 TITLE	
6 NAME	
6 STREET ADDRESS	
6 CITY-ST-ZIP	

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****200.00 ****200.00

4/28/95 MST

14. I 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: [signature] MARSHA L. PAPLHAM — SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date: 3/17/95 — Daytime Phone: 813 472-2230

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FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE

95 APR 27 AM 9:18

SECRETARY OF STATE TALLAHASSEE, FLORIDA

DOCUMENT # P94000093535 (0)

1. Corporate Name

G.L. HOMES OF WYNDHAM LAKES 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

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 12/28/1994

3a. Date of Last Report:

4. FEI Number: 65-0542344 — 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

2. Principal Office (if changed): 21 / Suite, Apt. #, etc. 22 / City & State 23 / Zip 24 / Country 25

2a. Mailing Address: 26 / Suite, Apt. #, etc. 27 / City & State 28 / Zip 29 / Country 30

9. Name and Address of Current Registered Agent

NORWALK, RICHARD M
1401 UNIVERSITY DR
SUITE 200
CORAL SPRINGS FL 33071

10. Name and Address of New Registered Agent

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

12. OFFICERS AND DIRECTORS

TITLE	PD
NAME	EZRATTI, ITZHAK
STREET ADDRESS	1401 UNIVERSITY DRIVE, #200
CITY-ST-ZIP	CORAL SPRINGS FL 33071
TITLE	VS
NAME	FANT, ALAN
STREET ADDRESS	1401 UNIVERSITY DRIVE, #200
CITY-ST-ZIP	CORAL SPRINGS, FL 33071
TITLE	VT
NAME	COSTELLO, RICHARD A
STREET ADDRESS	1401 UNIVERSITY DRIVE, # 200
CITY-ST-ZIP	CORAL SPRINGS, FL 33071
TITLE	S
NAME	EZRATTI, MOSHE
STREET ADDRESS	1401 UNIVERSITY DRIVE, #200
CITY-ST-ZIP	CORAL SPRINGS, FL 33071
TITLE	V
NAME	NORWALK, RICHARD M
STREET ADDRESS	1401 UNIVERSITY DRIVE, #200
CITY-ST-ZIP	CORAL SPRINGS, FL 33071
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS / CHANGES TO OFFICERS AND DIRECTORS [ ] Change [ ] Addition

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****200.00 ****200.00

4/27/95 MST

14. I the undersigned, 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 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: RM Norwalk 4/6/95 305-753-1730

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Richard M. Norwalk - V.P

0000345 FF