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PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P95000010093 (9)

1. Corporation Name

ATLANTIC GULF OF TAMPA, INC.



Principal Place of Business

Mailing Address

2601 S BAYSHORE DR 9TH FLOOR
MIAMI FL 33133-5461

2601 S BAYSHORE DR 9TH FLOOR
MIAMI FL 33133-5461

3. Date Incorporated or Qualified

02/07/1995

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

LANGLEY, MARCIA H
2601 S BAYSHORE DR 9TH FLOOR
MIAMI FL 33133-5461

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

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	VD	☐ DELETE
NAME	JEFFREY, THOMAS W	
STREET ADDRESS	2601 S BAYSHORE DR 9TH FLOOR	
CITY-STATE-ZIP	MIAMI FL 33133-5461	
TITLE	VSD	☒ DELETE
NAME	GONZALEZ, JULIO J	
STREET ADDRESS	2601 S BAYSHORE DR 9TH FLOOR	
CITY-STATE-ZIP	MIAMI FL 33133-5461	
TITLE	PD	☐ DELETE
NAME	GILLETTE, J T	
STREET ADDRESS	2601 S BAYSHORE DR 9TH FLOOR	
CITY-STATE-ZIP	MIAMI FL 33133-5461	
TITLE	VS	☐ DELETE
NAME	LANGLEY, MARCIA H	
STREET ADDRESS	2601 S BAYSHORE DR 9TH FLOOR	
CITY-STATE-ZIP	MIAMI FL 33133-5461	
TITLE	VT	☐ DELETE
NAME	FISCHER, JOHN H	
STREET ADDRESS	2601 S BAYSHORE DR 9TH FLOOR	
CITY-STATE-ZIP	MIAMI FL 33133-5461	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		

1.1 TITLE	✓ VSD	☒ Change ☐ Addition
1.2 NAME	Langley, Marcia H.	
1.3 STREET ADDRESS	2601 S Bayshore Dr.	
1.4 CITY-STATE-ZIP	Miami, FL 33133	
2.1 TITLE	✓ VAS	☐ Change ☒ Addition
2.2 NAME	Goldman, Joel K.	
2.3 STREET ADDRESS	2601 S Bayshore Dr.	
2.4 CITY-STATE-ZIP	Miami, FL 33133	
3.1 TITLE	✓	☐ Change ☒ Addition
3.2 NAME	Carleton, Callis N.	
3.3 STREET ADDRESS	2601 S Bayshore Dr.	
3.4 CITY-STATE-ZIP	Miami, FL 33133	
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-STATE-ZIP		
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-STATE-ZIP		
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-STATE-ZIP		

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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)(k), 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

4-12-96

Date:

305-859-4071

Daytime Phone #

CR2E034 (12/95)