

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION
ANNUAL REPORT
1996



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

1-2

DOCUMENT # **P95000014021 (6)**

1. Corporation Name
LGP REAL ESTATE CORPORATION



Principal Place of Business
**760 N.W. 107TH AVE.
SUITE 400
MIAMI FL 33172**

Mailing Address
**760 N.W. 107TH AVE.
SUITE 400
MIAMI FL 33172**

3. Date Incorporated or Qualified
02/20/1995

3a. Date of Last Report

4. FEI Number
65-0569572

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 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

**NEALON, THOMAS F III
760 N.W. 107TH AVE.
SUITE 400
MIAMI FL 33172**

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

85 Zip Code

FL

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 title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D <input type="checkbox"/> DELETE	1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KRASNOFF, JEFFREY P	1.2 NAME	
STREET ADDRESS	760 N.W. 107TH AVE. #400	1.3 STREET ADDRESS	<i>See Exhibit "A" attached</i>
CITY-ST-ZIP	MIAMI FL 33172	1.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LEWIS, WILLIAM M JR	2.2 NAME	
STREET ADDRESS	1251 AVE. OF THE AMERICAS 28TH FLOOR	2.3 STREET ADDRESS	<i>See Exhibit "A" attached</i>
CITY-ST-ZIP	NEW YORK NY 10020	2.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	300001806853
CITY-ST-ZIP		4.4 CITY-ST-ZIP	-05/03/96-01054-029
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	***200.00
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 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)(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: *Thomas F. Nealon* **4/26/96** (305) 220-4300
DATE: _____ DAYTIME PHONE: _____

CR2E034 (12/95)

EXHIBIT "A"

- William M. Lewis, Jr. ✓ - D/VP
1585 Broadway
37th Floor
New York, NY 10036

- Jeffrey P. Krasnoff ✓ - D/P/S/T
700 NW 107th Avenue
Suite 400
Miami, FL 33172

- David Levin - VP
760 NW 107th Avenue
Suite 400
Miami, FL 33172

- Thomas F. Nealon, III - AS
760 NW 107th Avenue
Suite 400
Miami, FL 33172