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May 05 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P95000025252 (4)**

1. Corporation Name

BALLANTRAE DEVELOPMENT CORP.

Principal Place of Business

**1800 S. AUSTRALIAN AVE., SUITE 400
WEST PALM BEACH FL 33409**

Mailing Address

**1800 S. AUSTRALIAN AVE., SUITE 400
WEST PALM BEACH FL 33409-6444**



3. Date Incorporated or Qualified
03/29/1995

3a. Date of Last Report
03/25/1996

4. FEI Number
22-3366681

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

2a. Mailing Address

21 Suite, Apt. #, etc

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**BRANNOCK, G. STEVEN
1800 S. AUSTRALIAN AVE., SUITE 400
WEST PALM BEACH FL 33409**

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 **D** ☐ DELETE
NAME **HOVNIANIAN, KEVORK S**
STREET ADDRESS **382 VIA LINDA**
CITY - ST - ZIP **PALM BEACH FL**

1.1 TITLE **President** ☐ Change ☒ Addition
1.2 NAME **Karl Reid Hotaling**
1.3 STREET ADDRESS **1800 S. Australian Ave #400**
1.4 CITY - ST - ZIP **West Palm Beach, FL 33409**

TITLE **D** ☐ DELETE
NAME **HOVNIANIAN, ARA K**
STREET ADDRESS **61 WHIPPORWILL VALLEY ROAD**
CITY - ST - ZIP **ATLANTIC HIGHLANDS NJ**

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP

TITLE **D** ☐ DELETE
NAME **MASON, TIMOTHY P**
STREET ADDRESS **22 DEVON DRIVE**
CITY - ST - ZIP **PISCATAWAY NJ**

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP

TITLE **D** ☐ DELETE
NAME **BUCHANAN, PAUL W**
STREET ADDRESS **8 BLUEBERRY LANE**
CITY - ST - ZIP **LEONARDO NJ**

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP

TITLE **D** ☐ DELETE
NAME **REINHART, PETER S**
STREET ADDRESS **2 BAYHILL ROAD**
CITY - ST - ZIP **LEONARDO NJ**

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP

TITLE **D** ☐ DELETE
NAME **SCHIMPF, JOHN J**
STREET ADDRESS **227 PELICAN ROAD**
CITY - ST - ZIP **MIDDELTOWN NJ**

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP

14. I do 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.

SIGNATURE:


SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Karl Reid Hotaling 4/14/97 (561) 478-0060

Date

Daytime Phone

0302162

CR2E034 (9/96)