FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997

SIGNATURE



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P95000032301 (0)**

LIFETIME PROPERTIES, INC.

Principal Place of Business Mailing Address 1805 ATLANTIC STREET 1805 ATLANTIC STREET #122 #122 MELBOURNE FL 32951-2435 MELBOURNE FL 32951 3a. Date of Last Report 3. Date Incorporated or Qualified 04/21/1995 08/23/1996 4. FEI Number 2a, Mailing Address Applied For 2. Principal Place of Business NOT APPLICABLE Not Applicable 26 21 Suite, Apt. #, etc. \$8.75 Additional Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 22 27 City & State \$5.00 May Be City & State 8. Election Campaign Financing Trust Fund Contribution Added to Fees 23 28 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒️ No Country Ζip Country $Z_{\rm IP}$ 29 30 24 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name WALDSTEIN, GEORGE 1805 ATLANTIC ST #122 Street Address (P.O. Box Number is Not Acceptable) **MELBOURNE BEACH FL 32951** 83 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. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE (NOTE: Registered Agent signature required when reinstating) Studetive, typed or per teair ame of registered agent and title if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. ___ Addition Change DELETE 11 TITLE HILE WALDSTEIN, GEORGE 1.2 NAME 1805 ATLANTIC ST #122 1.3 STREET ADDRESS STREET ADDRESS **MELBOURNE BEACH FL 32951** 1.4 CITY-ST-ZIP CITY - \$1 - 74P Change Addition ☐ DELETE 2.1 TITLE THE 2.2 NAME 2 3 STREET ADDRESS STREET ADDRESS 2. 4 CITY-ST-ZIP CITY S1 Addition DELETE ☐ Change 31 TITLE TITLE 32 NAME NAM 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY - ST - ZIP CITY ST ZIP Change Addition DELETE 4.1 TITLE 4. 2 NAME NAM 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - ST - ZIP CHY-\$1-78 Addition DELETE Chánge 51 TITLE 5.2 NAME NAME **5.3 STREET ADDRESS** STREET ASIDRESS 5.4 CITY - ST - ZIP [Change Addition DELETE 6.1 TITLE Tillet 6.2 NAME 6.3 STREET ADDRESS 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 or an attachment with an address.

(407) 742 9533

FILED

Apr 18 1997 8:00am

Secretary of State