

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
May 11, 1999 8:00 am  
Secretary of State

05-11-1999 90023 047 \*\*\*158.75

DOCUMENT # P95000036721

1. Corporation Name

STERLING IV FLORIDA, INC.



Principal Place of Business

209 PHIPPS PLAZA  
PALM BEACH FL 33433  
US

Mailing Address

209 PHIPPS PLAZA  
PALM BEACH FL 33433  
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/09/1995

4. FEI Number

65-0580677

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 owes the current year Intangible  
Personal Property Tax.



Yes No

9. Name and Address of Current Registered Agent

KOSOY, DAVID  
209 PHIPPS PLAZA  
17TH FLOOR  
PALM BCH FL 33480

10. Name and Address of New Registered Agent

81 Name

Brian D. Kosoy

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

209 Phipps Plaza

83

84 City

Palm Beach

FL

85 Zip Code

33480

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)

4-26-99

DATE

12. OFFICERS AND DIRECTORS

TITLE DP  
NAME KOSOY, A D  
STREET ADDRESS 209 PHIPPS PLAZA  
CITY-ST-ZIP PALM BEACH FL 33480

☒ DELETE

TITLE DV  
NAME STILLER, DUANE J  
STREET ADDRESS 209 PHIPPS PLZ  
CITY-ST-ZIP PALM BCH FL 33480

☐ DELETE

TITLE DVS  
NAME BEAULIEU, DENIS  
STREET ADDRESS 209 PHIPPS PLZ  
CITY-ST-ZIP PALM BCH FL 33480

☐ DELETE

TITLE DT  
NAME MARCHESSAULT, GERI  
STREET ADDRESS 209 PHIPPS PLZ  
CITY-ST-ZIP PALM BCH FL 33480

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

DP  
BRIAN D. Kosoy  
209 Phipps Plaza  
Palm Beach, FL 33480

☒ Change ☐ Addition

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

☐ Change ☐ Addition

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

☐ Change ☐ Addition

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

☐ Change ☐ Addition

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

☐ Change ☐ Addition

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

☐ Change ☐ Addition

14. I 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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-26-99 561-835-1810

Date

Daytime Phone #

CR2E034 (11/98)

0360247