

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

DOCUMENT # P95000051433 (7)

1. Corporation Name

G.L. HOMES OF WYNDHAM LAKES IV CORPORATION



Principal Place of Business

1401 UNIVERSITY DR.  
SUITE 200  
CORAL SPRINGS FL 33071

Mailing Address

1401 UNIVERSITY DR.  
SUITE 200  
CORAL SPRINGS FL 33071

3. Date Incorporated or Qualified

07/03/1995

3a. Date of Last Report

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

4. FEI Number  
65-0593832

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

9. Name and Address of Current Registered Agent

GRANT, MARK F  
200 EAST BROWARD BLVD.  
15TH FLOOR  
FT. LAUDERDALE FL 33301

10. Name and Address of New Registered Agent

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 FEI, if applicable

NOTE: Registered Agent signature required when filing

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE PD ☐ Change ☒ Addition  
12 NAME EZRATTI, ITZHAK  
13 STREET ADDRESS 1401 UNIVERSITY DRIVE SUITE 200  
14 CITY-ST-ZIP CORAL SPRINGS, FL 33071

21 TITLE VS ☐ Change ☒ Addition  
22 NAME FANT, ALAN  
23 STREET ADDRESS 1401 UNIVERSITY DRIVE SUITE 200  
24 CITY-ST-ZIP CORAL SPRINGS, FL 33071

31 TITLE VT ☐ Change ☒ Addition  
32 NAME COSTELLO, RICHARD  
33 STREET ADDRESS 1401 UNIVERSITY DRIVE SUITE 200  
34 CITY-ST-ZIP CORAL SPRINGS, FL 33071

41 TITLE S ☐ Change ☒ Addition  
42 NAME EZRATTI, MOSHE  
43 STREET ADDRESS 1401 UNIVERSITY DRIVE SUITE 200  
44 CITY-ST-ZIP CORAL SPRINGS, FL 33071

51 TITLE V ☐ Change ☒ Addition  
52 NAME NORWALK, RICHARD  
53 STREET ADDRESS 1401 UNIVERSITY DRIVE SUITE 200  
54 CITY-ST-ZIP CORAL SPRINGS, FL 33071

61 TITLE ☐ Change ☐ Addition  
62 NAME  
63 STREET ADDRESS  
64 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/29/96

(954) 753-1730

CR2E034 (12/95)