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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

雅丽·华·安·尔·尔·亚·克·特·克·特尔·克·特尔·伊·斯克·克·克·斯克·克·克·斯克·克·克·斯克·克·斯克·克·克·斯克·克·克·克·克·克·克·克·克·克·克·克·克·克·克·克·克·克·克

DOCUMENT # P95000069513 (6)

CORAL RIDGE COMMUNITIES, INC.

Principal Place of Business Mailing Address

3300 UNIVERSITY DR.

3300 UNIVERSITY DR.

CORAL SPRINGS FL 33065

CORAL SPRINGS FL 33065-6309

FILED Apr 21 1997 8:00am Secretary of State



CORAL SPRIN		CORAL SPRINGS FL 3300	65- 630 9						
y						3. Date Incorporated or Qualified	3a. Date	of Last F	Report
						09/11/1995	04/24		icport
2. Principal P	Place of Business	2a. Mailing Address				4. FEI Number	1 0 1/4 1/		pplied For
21		26			65-0615045			ot Applicable	
Sulte, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired			Additional	
22		27				6. Certificate of Status Desired		Fee R	equired
City & Stat	е	City & State				6. Election Campaign Financing	_	\$5.00	May Be
23		28	1 .			Trust Fund Contribution		Added	to Fees
Zip	Country	Zip	Country			8. This corporation has liability for intangible tax under s. 199.032,			
24	25 9. Name and Address of Curren	29	30				Yes		
001		r uglisteren waerit		B1	Name	10. Name and Address of New Re	gistered Ag	ent	
	RDON, K Y		ĺ		Name				
) UNIVERSITY DR.		82 Street Ad			Address (P.O. Box Number is Not Acceptable)			
UUr	IAL SPRINGS FL 33065			83					
12.14 (f) 1				83					
1+				84	City			85 Zip	Code
dd Durauant	to the provisions of Continue COZ DEOL) CO2 4500 ()	1				FL		
office or r	egistered agent, or both, in the State	of Florida, Such change was	ites, the ab authorized	bove by	:-named : the corp	corporation submits this statement for the poporation's board of directors. I hereby accept	urpose of cr It the appoin	ianging r tment as	ts registered registered
agent. I s	rii iamiliar with, and accept the obliga	itions of, Section 607.0505, F	iorida Stati	utes	i.				
SIGNATURE	Signature, typed or printed name of registered ager	ange)	Κe	nr	neth	Y. Gordon 4/1	5/97		
12.	OFFICERS AND		13.	age	nt signature	ADDITIONS/CHANGES TO OFFIC	DATE EDC AND D	DECTOR	OC IN 40
TITLE	PD	DELETE	1.1 10	 ! F		Senior V/D		Change	K Addition
NAME	HÖFFMAN, A JR		1.2 NA			STREIB, LARRY W.	L	1 Onlange	KJ Addition
STREET ADDRESS	801 LAUREL OAK DR.				ADDRESS	3300 University Drive			
CITY-ST-ZIP	NAPLES FL 33963		1.4 017			Coral Springs, FL 3306	5		
TITLE	VD	DELETE	21 117			Senior V/D	" — г	Change	Addition
NAME	RAMSEY, R W		22 NAI	ME		DILLON, RONALD C.			
STREET ADDRESS	3300 UNIVERSITY DR.				ADDRESS	3300 University Drive			
CITY-ST-ZIP	CORAL SPRINGS FL 33065		2. 4 011			Coral Springs, FL 3306	5		
TITLE	VSD	DELETE	3.1 1)11		`	V		Change	Addition
NAME	MCGOWAN, J P		3.2 NAN	ME		ANGELO, PAUL J.		•	
STREET ADDRESS	3300 UNIVERSITY DR.		3.3 \$1F	REE 1 /	ADDRESS	3300 University Drive			
CITY-ST-ZIP	CORAL SPRINGS FL 33065		3.4 CIT	IY-S	1-2IP	Coral Springs, FL 3306	5		
TITLE	V	DELFTE	4.1 7111			V		Change	Addition
NAME	DYESS, R D		4. 2 NA	МΕ	ļ	HARRISON, THOMAS J.		-	Λ
STREET ADDRESS	3300 UNIVERSITY DR.		4.3 STF	REET A	ADURESS	3300 University Drive			
CITY+ST-ZIP	CORAL SPRINGS FL 33065	,	4.4 CIT	Y - \$T	1-71P	Coral Springs, FL 3306	5		
TITLE	V	DELFTE	5.1 1111	ιĒ		AV		Change	Addition
NAME	GRAHAM, D H		5.2 NAM	ME	ŀ	HITCHCOCK, PATRICIA Z.			
STREET ADDRESS	3300 UNIVERSITY DR.		5.3 S1R	EFT /	ADDRESS	3300 University Drive			
CITY-ST-ZIP	CORAL SPRINGS FL 33065		54 011	Y-S1	- ZIP	-Coral-Springs, FL 3306	5		
TITLE	1	DELETE	61 100					Change	Addition
NAME	DISTEFANO, P L		62 NAN	ME		AV KOLP, ROBERTA L.			
STREET ADDRESS	3300 UNIVERSITY DR.		63 \$1R	REE1 /	ADDRESS	3300 University Drive			
CITY-ST-ZIP	CORAL SPRINGS FL 33065		6.4 CiT				E		
	by certify that the information supplied	with this filing does not qual				Coral Springs FI 3306 ated in Section 19.07370, Florida Statutes	I furibor co	rtifu that	tho

4. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119 07(8)(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.

CIGNATURE

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05/ 750 1100