

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 # P95000075385 (1)

1. Corporation Name

ATLANTIC REALTY GROWTH FUND I CORP.



Principal Place of Business

1900 GLADES ROAD
SUITE 305
BOCA RATON FL 33487

Mailing Address

1900 GLADES ROAD
SUITE 305
BOCA RATON FL 33487

3. Date Incorporated or Qualified
09/29/1995

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21

26

4. FLI Number

65-0614271

Applied For

Not Applicable

22

Suite, Apt. #, etc.

27

Suite, Apt. #, etc.

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

23

City & State

28

City & State

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

24

Zip

Country

29

Zip

Country

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

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

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

(Sign in blue ink. Print name of person signing in black ink.)

(Print Registered Agent Signature in black ink.)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

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

11 TITLE

PRESIDENT/DIRECTOR

☐ Change

☒ Addition

12 NAME

DARRYL W. PARMENTER

13 STREET ADDRESS

501 BRICKELL KEY DR., STE 509

14 CITY- ST- ZIP

MIAMI, FL 33131

21 TITLE

VICE PRESIDENT/DIRECTOR

☐ Change

☒ Addition

22 NAME

MARC E. deBAPTISTE

23 STREET ADDRESS

1900 GLADES RD, STE 305

24 CITY- ST- ZIP

BOCA RATON, FL 33431

31 TITLE

VICE PRESIDENT/DIRECTOR

☐ Change

☒ Addition

32 NAME

W. RADFORD LOVETT, II

33 STREET ADDRESS

1600 INDEPENDENT SQUARE

34 CITY- ST- ZIP

JACKSONVILLE, FL 32202

41 TITLE

SECRETARY/DIRECTOR

☐ Change

☒ Addition

42 NAME

ROBERT R. KREIS

43 STREET ADDRESS

1600 INDEPENDENT SQUARE

44 CITY- ST- ZIP

JACKSONVILLE, FL 32202

51 TITLE

TREASURER/DIRECTOR

☐ Change

☒ Addition

52 NAME

RICHARD P. DONNELLAN, JR.

53 STREET ADDRESS

1900 GLADES ROAD, STE 305

54 CITY- ST- ZIP

BOCA RATON, FL 33431

61 TITLE

DIRECTOR

☐ Change

☒ Addition

62 NAME

SYDNEY A. GERVIN, III

63 STREET ADDRESS

1600 INDEPENDENT SQUARE

64 CITY- ST- ZIP

JACKSONVILLE, FL 32202

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

4/25/96

205-879-7580

CR2E034 (12/95)