

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

FILED

May 12 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P95000075385 (1)**

1. Corporation Name

ATLANTIC REALTY GROWTH FUND I CORP.

Principal Place of Business

**501 BRICKELL KEY DRIVE
SUITE 509
MIAMI FL 33131**

Mailing Address

**501 BRICKELL KEY DRIVE
SUITE 509
MIAMI FL 33131**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

09/29/1995

4. FEI Number

65-0614271

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 or has paid the current year Intangible
Personal Property Tax due June 30. ☒ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

**PARMENTER, DARRYL W
501 BRICKELL KEY DRIVE
SUITE 509
MIAMI FL 33131**

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 607.1506, 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)

DATE

12. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> DELETE
NAME	PARMENTER, DARRYL W	
STREET ADDRESS	501 BRICKELL KEY DRIVE SUITE 509	
CITY-ST-ZIP	MIAMI FL 33131	

TITLE	VPD	<input checked="" type="checkbox"/> DELETE
NAME	DEBAPTISTE, MARC E	
STREET ADDRESS	2800 N. MILITARY TRAIL STE 180	
CITY-ST-ZIP	BOCA RATON FL 33431	

TITLE	VPD	<input type="checkbox"/> DELETE
NAME	LOVETT, RADFORD W II	
STREET ADDRESS	1800 INDEPENDENT SQUARE	
CITY-ST-ZIP	JACKSONVILLE FL 32202	

TITLE	SD	<input type="checkbox"/> DELETE
NAME	KREIS, ROBERT R	
STREET ADDRESS	1800 INDEPENDENT SQUARE	
CITY-ST-ZIP	JACKSONVILLE FL 32202	

TITLE	TD	<input checked="" type="checkbox"/> DELETE
NAME	DONNELLAN, RICHARD P JR.	
STREET ADDRESS	2800 N. MILITARY TRAIL STE 180	
CITY-ST-ZIP	BOCA RATON FL 33431	

TITLE	D	<input type="checkbox"/> DELETE
NAME	GERVIN, SYDNEY A III	
STREET ADDRESS	1800 INDEPENDENT SQUARE	
CITY-ST-ZIP	JACKSONVILLE FL 32202	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	
13 STREET ADDRESS	
14 CITY-ST-ZIP	

21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME	
23 STREET ADDRESS	
24 CITY-ST-ZIP	

31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME	
33 STREET ADDRESS	
34 CITY-ST-ZIP	

41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME	
43 STREET ADDRESS	
44 CITY-ST-ZIP	

51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME	
53 STREET ADDRESS	
54 CITY-ST-ZIP	

61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME	
63 STREET ADDRESS	
64 CITY-ST-ZIP	

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.

SIGNATURE:

4/29/98

305.379.7500

CR2E034 (10/97)