

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 # **P95000085558 (1)**

1. Corporation Name

**CENTERLINE HOMES AT WYNDHAM LAKES II, INC.**



Principal Place of Business

**5025 N.W. 115 TERRACE  
CORAL SPRINGS FL 33076**

Mailing Address

**5025 N.W. 115 TERRACE  
CORAL SPRINGS FL 33076**

3. Date Incorporated or Qualified

**11/06/1995**

3a. Date of Last Report

2. Principal Place of Business

21 **334 LAKE CREST COURT**

2a. Mailing Address

26 **334 LAKE CREST COURT**

4. FEI Number

**65-0542936**

☒ 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

City & State

2 **FT. LAUDERDALE, FL**

City & State

28 **FT. LAUDERDALE, FL**

24 **33326**

Country

29 **33326**

Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**ROTHENBERG, LARRY A P.A.  
2424 NORTH FEDERAL HIGHWAY  
SUITE 455  
BOCA RATON FL 33431**

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 title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

NAME **D MOSCOVITCH, LEWIS**  
STREET ADDRESS **5025 N.W. 115 TERRACE**  
CITY - ST - ZIP **CORAL SPRINGS FL 33076**

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

**334 LAKE CREST COURT  
FT. LAUDERDALE, FL 33326**

☐ Change ☐ Addition

TITLE ☐ DELETE

NAME **D PERRY, CRAIG**  
STREET ADDRESS **5025 N.W. 115 TERRACE**  
CITY - ST - ZIP **CORAL SPRINGS FL 33076**

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

**334 LAKE CREST COURT  
FT. LAUDERDALE, FL 33326**

☐ Change ☐ Addition

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

☐ Change ☐ Addition

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

☐ Change ☐ Addition

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

☐ Change ☐ Addition

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

☐ Change ☐ Addition

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, upon an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**CRAIG PERRY**

**4/18/96**

Date

**954-344-1883**

Daytime Phone #

CR2E034 (12/95)