

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
May 04, 1999 8:00 am
Secretary of State

05-04-1999 90018 010 ***150.00

DOCUMENT # P95000089620

1. Corporation Name

HARBORSIDE AT BOCA BAY DEVELOPMENT CORPORATION

Principal Place of Business

500 WATER STREET
JACKSONVILLE FL 32202
US

Mailing Address

500 WATER STREET
S/C J-180
JACKSONVILLE FL 32202

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

11/22/1995

4. FEI Number

59-3307394

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax.

☒ Yes

☐ No

9. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

10. Name and Address of New Registered Agent below

81 Name

NOTE: This company is included in a

82 Street Address (P.O. Box Number is Not Acceptable)

consolidated intangible personal

83 property tax return filed on behalf of
CSX Corporation and consolidated

84 affiliates, FEIN 62-1051971

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

TITLE	D	<input type="checkbox"/> DELETE
NAME	BECK, STEPHEN D	
STREET ADDRESS	301 W BAY	
CITY-ST-ZIP	JACKSONVILLE FL	
TITLE	PD	<input type="checkbox"/> DELETE
NAME	NICHOLS, CH	
STREET ADDRESS	500 WATER STREET	
CITY-ST-ZIP	JACKSONVILLE FL 32202	
TITLE	VPD	<input type="checkbox"/> DELETE
NAME	WARD, M J	
STREET ADDRESS	500 WATER STREET	
CITY-ST-ZIP	JACKSONVILLE FL 32202	
TITLE	VPS	<input type="checkbox"/> DELETE
NAME	AFTOORA, P.J.	
STREET ADDRESS	500 WATER ST	
CITY-ST-ZIP	JACKSONVILLE FL	
TITLE	VP	<input type="checkbox"/> DELETE
NAME	CROSBY, S A	
STREET ADDRESS	301 W BAY ST.	
CITY-ST-ZIP	JACKSONVILLE FL	
TITLE	VPC	<input type="checkbox"/> DELETE
NAME	WODEHOUSE, CJO	
STREET ADDRESS	500 WATER STREET	
CITY-ST-ZIP	JACKSONVILLE FL 32202	

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

SEE ATTACHED LIST

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, with all other like empowered.

SIGNATURE:

Patricia J. Aftoora
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/15/99 (904) 366-4242
Patricia J. Aftoora, Vice-President

Date

Daytime Phone #

CR2E034 (11/98)

HARBORSIDE AT BOCA BAY DEVELOPMENT CORPORATION

475647-90018-10
P95000089620

Directors

<u>Name</u>	<u>Address</u>
S. D. Beck	301 West Bay Street Jacksonville, FL 32202
P. J. Aftoora	500 Water Street Jacksonville, FL 32202
R. J. Conway	500 Water Street Jacksonville, FL 32202

Officers

<u>Name</u>	<u>Title</u>	<u>Address</u>
R. J. Conway	President	500 Water Street Jacksonville, FL 32202
M. J. Ward	Executive Vice-President	500 Water Street Jacksonville, FL 32202
P. M. Giftos	Senior Vice-President	500 Water Street Jacksonville, FL 32202
P. J. Aftoora	Vice-President and Corporate Secretary	500 Water Street Jacksonville, FL 32202
F. J. Favorite	Vice-President	500 Water Street Jacksonville, FL 32202
D. A. Boor	Treasurer	500 Water Street Jacksonville, FL 32202