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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000016114 (6)

FLAGLER APARTMENTS CORP.

Principal Place of Business Mailing Address 1988 W. TERRAMAR DR POMPANO BCH FL 33062 1988 W TERRAMAR DR POMPANO BCH FL 33062

FILED Apr 21 1998 8:00am Secretary of State



US	US				DO NOT WRITE IN THIS SPACE	
					3. Date Incorporated or Qualified	
					02/16/1996	
2. Principal P	lace of Business	2a, Mailing Address			4, FEI Number	Applied For
21		[26]			65-0645129	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State			6. Election Campaign Financing	\$5.00 May Be
23		28			Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country		8. This corporation owes or has paid the curre	nt year Intangible
24	25	29	30			Yes No
	g, Name and Address of Current	10. Name and Address of New Registered Ag	ent			
HCRM CORP.				81 Name		
2200 CORPORATE BLVD, NW, SUITE 401				82 Street Address (P.O. Box Number is Not Acceptable)		
t	OCA RATON FL 33431			83		
				84 City	FL	85 Zip Code
11. Pyrsuant 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 Statutos.						
SIGNATURE Signature, typied or produce name of registered agond and this if apply able (NOT): Registered Agont signature required when reinstating) DATE						
12.	OFFICERS AND		13.	or Agent signature te	ADDITIONS/CHANGES TO OFFICERS AND D	IRECTORS IN 12
TITLE	PD	DELETE	111	TL F		Change Addition
NAME	GASTOM, MICHAEL F		12 N		_	
STREET ADDRESS	11 GATEHOUSE RD			TREET ADDRESS		[8
CITY-ST-ZIP	SEA RANCH LAKES FL		1.4 CITY-			Į,
TITLE	SD	DELETE	2.1]			Change Addition C
NAME	GASTOM, LYDIA A	GASTOM, LYDIA A 22				
STREET ADDRESS	11 GATEHOUSE RD		2.3 STREET ADDRESS			
CITY-ST-ZIP	SEA RANCH LAKES FL			11Y-ST-7(P	•	1
TITLE			3.1 7			Change Addition
NAME	MATERIAL AND		3.2 N	AME		
STREET ADDRESS	ADAG MI TERRALAR ROUT		3.3 S	IRECT ADDRESS		
CITY-ST-ZIP	POMPANO BEACH FL			11Y - \$1 - ZIP		1
TITLE	T	DELETE	4.1 TI			Change Addition
NAME	KUCHNIK, BRYGIDA		4.21	AME		
STREET ADDRESS	1988 W TERRAMAR DR.		4.3 S	REE1 ADORESS		
CITY-ST-ZIP	POMPANO BEACH FL		4.4 C	TY - ST - ZIP		
TITLE		☐ DELETE	5.1 TI	ILF		Change Addition
NAME			5.2 N	AME		
STREET ADDRESS			5.3 S	REE1 ADDRESS		ł
CITY-ST-ZIP			5.4 C	1Y-S1-ZIP		
TITLE		☐ DELETE	6.1 TI	ILF		Change Addition
NAME			6.2 N	ME		
STREET ADDRESS			6.3 S	REET ADDRESS		
City - St - ZIP			6.4 C	1Y-S1-ZIP		
	certify that the information supplied wit	h this filing does not qualify f			in Section 119.07(3)(i), Florida Statutes. I further certif	y that the information

indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same logal 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.