


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

FILED
Mar 24, 1999 8:00 am
Secretary of State

03-24-1999 90007 032 ***158.75

PROFIT CORPORATION ANNUAL REPORT 1999		 FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P96000026088			
1. Corporation Name G.L. HOMES OF BOYNTON BEACH III CORPORATION			
Principal Place of Business 1401 UNIVERSITY DRIVE SUITE 200 CORAL SPRINGS FL 33071		Mailing Address 1401 UNIVERSITY DRIVE SUITE 200 CORAL SPRINGS FL 33071	
2. Principal Place of Business 21		2a. Mailing Address 26	
Suite, Apt. #, etc. 22		Suite, Apt. #, etc. 27	
City & State 23		City & State 28	
Zip 24		Zip 29	
Country 25		Country 30	
9. Name and Address of Current Registered Agent GRANT, MARK F 200 EAST BROWARD 15TH FLOOR FT. LAUDERDALE FL 33301			
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 607.1508, 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____			
12. OFFICERS AND DIRECTORS			
TITLE	PD	<input type="checkbox"/> DELETE	
NAME	EZRATTI, ITZHAK		
STREET ADDRESS	1401 UNIVERSITY DR STE 200		
CITY-ST-ZIP	CORAL SPRGS FL 33071		
TITLE	VS	<input type="checkbox"/> DELETE	
NAME	FANT, A		
STREET ADDRESS	1401 UNIVERSITY DR STE 200		
CITY-ST-ZIP	CORAL SPRGS FL 33071		
TITLE	VT	<input type="checkbox"/> DELETE	
NAME	COSTELLO, RICHARD		
STREET ADDRESS	1401 UNIVERSITY DR STE 200		
CITY-ST-ZIP	CORAL SPRGS FL 33071		
TITLE	V	<input type="checkbox"/> DELETE	
NAME	NORWALK, RICHARD		
STREET ADDRESS	1401 UNIVERSITY DR STE 200		
CITY-ST-ZIP	CORAL SPRGS FL 33071		
TITLE	S	<input type="checkbox"/> DELETE	
NAME	EZRATTI, MOSHE		
STREET ADDRESS	1401 UNIVERSITY DR STE 200		
CITY-ST-ZIP	CORAL SPRGS FL 33071		
TITLE	V	<input type="checkbox"/> DELETE	
NAME	ARKIN, R		
STREET ADDRESS	1401 UNIVERSITY DR, STE 200		
CITY-ST-ZIP	CORAL SPRGS FL 33071		
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 checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
6.2 NAME	ARKIN, RICHARD		
6.3 STREET ADDRESS			
6.4 CITY-ST-ZIP			



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 03/25/1996	
4. FEI Number 65-0668029	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation owes the current year Intangible Personal Property Tax. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

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:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

RICHARD NORWALK VICE PRESIDENT

03/15/99

Date

954-753-1730

Daytime Phone #

CR2E034 (11/98)

0168241