

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P96000056798

1. Entity Name
COUNTRY LAKES DEVELOPMENT CORPORATION

FILED
May 16, 2000 8:00 am
Secretary of State

05-16-2000 90164 007 ***150.00

Principal Place of Business 2601 SOUTH BAYSHORE DRIVE MIAMI FL 33133-5461	Mailing Address 2601 S. BAYSHORE DRIVE LEGAL DEPT., SUITE 900 MIAMI FL 33133-5417
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 4800 N. Federal Highway	3. Mailing Address 200 S. Biscayne Boulevard
Suite, Apt. #, etc. Suite 105E	Suite, Apt. #, etc. Suite 4900
City & State Boca Raton, FL	City & State Miami, FL
Zip 33431	Country
Country	Zip 33131
Country	Country

4. FEI Number **65-0680072**

Applied For
Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
**GOLDMAN, JOEL K ESQ.
2601 SOUTH BAYSHORE DRIVE
SUITE 900
MIAMI FL 33133**

7. Name and Address of New Registered Agent

Name K. Lawrence Gragg
Street Address (P.O. Box Number is Not Acceptable) 200 S. Biscayne Blvd., Suite 4900
City Miami
State FL
Zip Code 33131

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE *K. Lawrence Gragg* DATE 4/28/00

Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input checked="" type="checkbox"/> Delete JEFFREY, THOMAS W 2601 SOUTH BAYSHORE DRIVE MIAMI FL 33133-5461
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V <input checked="" type="checkbox"/> Delete LAGUARDIA, JOHN 2601 SOUTH BAYSHORE DRIVE MIAMI FL 33133
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VT <input type="checkbox"/> Delete FISCHER, JOHN H 2601 SOUTH BAYSHORE DRIVE MIAMI FL 33133-5461
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P <input type="checkbox"/> Delete WOODBURY, KIMBALL D 2601 SOUTH BAYSHORE DRIVE MIAMI FL 33133-5461
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSD <input checked="" type="checkbox"/> Delete GOLDMAN, JOEL K 2601 SOUTH BAYSHORE DRIVE MIAMI FL 33133-5461
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSCD <input checked="" type="checkbox"/> Delete COOK, PAULA 2601 S. BAYSHORE DR. MIAMI FL 33133

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P/D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Ackerman, Richard S. 4800 N. Federal Highway, Suite 105E Boca Raton, FL 33431
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Gitlin, Gene 4800 N. Federal Highway, Suite 105E Boca Raton, FL 33431
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Richard S. Ackerman* DATE 4/30/00 561-395-9666

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/99)