PROFIT
CORPORATION
ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000072514

1. Corporation Name
TOWN PROPERTIES OF FLORIDA, INC.

## FILED Mar 04, 1999 8:00 am Secretary of State

03-04-1999 90130 032 \*\*\*150.00



Principal Place of Business Mailing Address					/				
101 SE 21ST S	Т	101 SE 21ST ST	01 SE 21ST ST						
FORT LAUDERD	ALE FL 33316	FORT LAUDERDALE FL 33316				DO NOT WRITE IN THIS SPACE			
						3. Date Incorporated or Qualifed			
						08/28/1996			
2. Principal Pl	ace of Business	2a. Mailing Address	-			4. FEI Number		Appli	ied For
21		26				65-0740849		Not /	Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired	¥		ditional
22		27	d			5. Certificate of charas bosines		Requ	
City & State	9	City & State				6. Election Campaign Financing \$5.00 May Be			
23		28				Trust Fund Contribution		ed to	Fees
Zip	Country	Zip				8. This corporation owes the current year	Intangible ☐ Yes	г	]No
24	25		0			Personal Property Tax.  10. Name and Address of New Registers			140
	9. Name and Address of Curren	t Registered Agent		81	Name	10. Name and Address of New Registere	u Ageitt		
WIES	SCHENBERG, CARL L			١,	Name				
	SE 21ST ST			82	Street Add	lress (P.O. Box Number is Not Acceptable)			
	T LAUDERDALE FL 33316			83					
1011	I Broberbree Le 00010						· 	C-	
				84	City	F	L 85 Z	Zip Co	ue
11. Pursuant	to the provisions of Sections 607.050	2 and 607.1508, Florida Statutes	s, the al	oove-	named corp	poration submits this statement for the purpose	of changing	j its re	gistered
office or re	egistered agent, or both, in the State m familiar with, and accept the obliga	of Florida. Such change was aut	norizea	l by ti	he corporati	ion's board of directors. I hereby accept the app	ointment as	s regis	itered
SIGNATURE						red when reinstating) DATE			
42	Signature, typed or printed name of registered age	nt and title if applicable (NOTE: F	13.	Agent	signature require	ADDITIONS/CHANGES TO OFFICERS		CTOR	S IN 12
TITLE	D OFFICERS AN	DELETE	1.1 TII	n F		ADDITIONAL PROPERTY OF STATE O	Char		Addition
NAME	WRIGHT, PATRICIA		1.2 NA				_	_	
	101 SE 21ST ST				ADDRESS				
STREET ADDRESS	FT LAUDERDALE FL			TY-ST-		•			
CITY-ST-ZIP	D D	☐ DELETE	2.1 TIT		- 211		☐ Chan	nge	Addition
NAME	RACK, LASZLO	<u></u>	2.2 NA			ويوالا يسامه والارارا	*	<b></b> .	
STREET ADDRESS	311 LIDO DR				ADDRESS				
	FT LAUDERDALE FL		•	ITY-ST	1				
CITY-ST-ZIP	P	DELETE	3.1 111				Chan	nge	Addition
NAME	WIESCHENBERG, CARL L		3.2 NA						
STREET ADDRESS	101 SE 21ST ST				ADORESS				
	FT LAUDERDALE FL			TY-ST					
CITY-ST-ZIP TITLE	ST	☐ DELETE	4.1 TIT				Char	nge	Addition
NAME	WRIGHT, PATRICIA		4. 2 N						
STREET ADDRESS	101 SE 21ST ST				ADDRESS				
	FT LAUDERDALE FL			TY-ST					
CITY-ST-ZIP	I I LAUDENDALL I L	☐ DELETE	5.1 TII	_	- 21		Char	nge	☐ Addition
NAME			5.2 NA						_
STREET ADDRESS					ADDRESS				
				TY-ST-					
CITY-ST-ZIP TITLE		☐ DELETE	6.1 TI			4	☐ Char	nge	Addition
			6.2 NA	ME			_ <del>-</del>		_
NAME STORET ADDOESS					ADDRESS				
STREET ADDRESS				TY-ST-					
CITY-ST-7IP			0.7 0	01.					

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 of 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OF DIRECTOR

219199 964-761-3472

CR2E034 (11/98)