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Mar 26 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P96000082917 (1)

1. Corporation Name

ESI DOSWELL GP II, INC.

Principal Place of Business

11760 U.S. HIGHWAY ONE
SUITE 600
NORTH PALM BEACH FL 33408

Mailing Address

11760 U.S. HIGHWAY ONE
SUITE 600
NORTH PALM BEACH FL 33408

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/08/1996

4. FEI Number

65-0704961

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☒ Yes ☐ No

See Attached

9. Name and Address of Current Registered Agent

LEON, J.E.
9250 WEST FLAGLER STREET
MIAMI FL 33174

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

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 AS ☐ DELETE

NAME TANCER, EDWARD F
STREET ADDRESS 11760 U.S. HIGHWAY ONE
CITY-ST-ZIP NORTH PALM BEACH FL

TITLE DP ☐ DELETE

NAME HOFFMAN, KENNETH P.
STREET ADDRESS 11760 US HWY ONE, STE. 600
CITY-ST-ZIP NORTH PALM BEACH FL

TITLE DV ☐ DELETE

NAME GELBER, LESLIE J.
STREET ADDRESS 11760 US HWY ONE, STE. 600
CITY-ST-ZIP NORTH PALM BEACH FL

TITLE DT ☒ DELETE

NAME MCGRATH, ROBERT L.
STREET ADDRESS 11760 US HWY ONE, STE. 600
CITY-ST-ZIP NORTH PALM BEACH FL

TITLE S ☐ DELETE

NAME CARPENTER, FRANCES M.
STREET ADDRESS 11760 US HWY ONE, STE. 600
CITY-ST-ZIP NORTH PALM BEACH FL

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE DT ☐ Change ☒ Addition

1.2 NAME BOYLAN, PETER
1.3 STREET ADDRESS 11760 US HIGHWAY ONE SUITE 600
1.4 CITY-ST-ZIP NORTH PALM BEACH FL 33408

2.1 TITLE AS ☐ Change ☒ Addition

2.2 NAME HATHAWAY, SCOT C
2.3 STREET ADDRESS 11760 US HIGHWAY ONE SUITE 600
2.4 CITY-ST-ZIP NORTH PALM BEACH FL 33408

3.1 TITLE AS ☐ Change ☒ Addition

3.2 NAME PONDER, STEPHEN H
3.3 STREET ADDRESS 11760 US HIGHWAY ONE SUITE 600
3.4 CITY-ST-ZIP NORTH PALM BEACH FL 33408

4.1 TITLE V ☐ Change ☒ Addition

4.2 NAME SMITH, GLENN E
4.3 STREET ADDRESS 11760 US HIGHWAY ONE SUITE 600
4.4 CITY-ST-ZIP NORTH PALM BEACH FL 33408

5.1 TITLE D/V ☒ Change ☐ Addition

5.2 NAME HOFFMAN, KENNETH P.

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE D/P ☒ Change ☐ Addition

6.2 NAME GELBER, LESLIE J.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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.

SIGNATURE: FRANCES M CARPENTER, SECRETARY

Frances M. Carpenter 2/6/98 (561)691-3500

CR2E034 (10/97)