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

PROFIT CORPORATION ANNUAL REPORT

1998

17



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

P96000090200 (2) DOCUMENT #

NLS COMMUNITIES, INC.

Principal Place of Business

Mailing Address

FILED Apr 29 1998 8:00am Secretary of State



1800 CORPORATE BLVD. #300 1800 CORPORATE BLVD. #300 **BOCA RATON FL 33431 BOCA RATON FL 33431** DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 11/04/1996 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 21 26 65-0704238 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 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 current year Intangible Personal Property Tax due June 30. Yes No 24 25 29 30 Personal Properly Tax due June 30. g. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name KOEPPEL, JOEL P 222 LAKEVIEW AVENUE 82 Street Address (P.O. Box Number is Not Acceptable) SUITE 260 83 W. PALM BEACH FL 33401 84 City Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statules, 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 Statules. SIGNATURE Signature typed or printed name of registrated agent and title if applicablin (NOTE: Registered Agent signature required whan reinstating) OFFICERS AND DIRECTORS 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE DΡ Change Addition TITLE 1.1 TITLE SIEGEL, NED L NAME 1.2 NAME 1800 CORPORATE BLVD., NW, STE 300 STREET ADDRESS 1.3 STREET ADDRESS **BOCA RATON FL 33431** CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE Change TITLE DVS 21 TITLE ☐ Addition NAME **GRUNDT. BRUCE S** 2.2 NAME 1800 CORPORATE BLVD., NW, STE 300 STREET ADDRESS 2.3 STREET ADDRESS **BOCA RATON FL 33431** CITY-ST-ZIP 2.4 CITY-ST-ZIP Change DELETE TITLE 3.1 TITLE Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 34. CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition 5.1 THILE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

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 proposer 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 or an also himself the corporation of the corporation of the corporation or the proposer of 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 or an also himself the corporation of the corporat

SIGNATURE:

CITY-ST-ZIP

V61-9989 200