

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

FILED

Feb 12 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 # P97000009309 (0)

1. Corporation Name

BLUE LAKE MANAGEMENT, INC.

Principal Place of Business

Mailing Address

1800 CORPORATE BLVD NW
SUITE 300
BOCA RATON FL 33431

1800 CORPORATE BLVD NW
SUITE 300
BOCA RATON FL 33431

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/30/1997

4. FEI Number

65-0697836

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

2. Principal Place of Business

21 5000 Blue Lake Drive

Suite, Apt. #, etc.

22 Suite 100

City & State

23 Boca Raton Florida

Zip 33431

Country USA

24

2a. Mailing Address

26 5000 Blue Lake Drive

Suite, Apt. #, etc.

27 Suite 100

City & State

28 Boca Raton Florida

Zip 33431

Country USA

29

30

9. Name and Address of Current Registered Agent

MANSNOFF, MICHAEL D
1800 CORPORATE BLVD NW
SUITE 300
BOCA RATON FL 33431

MASANOFF

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

5000 Blue Lake Drive

83 Suite 100

84 City Boca Raton

FL

85 Zip Code 33431

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

MICHAEL D. MASANOFF - DIRECTOR 2/4/98

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☒ Addition

1.2 NAME Director

1.3 STREET ADDRESS Michael D. Masanoff

1.4 CITY-ST-ZIP 5000 Blue Lake Drive, Suite 100

2.1 TITLE Boca Raton, Florida 33431 ☐ Change ☒ Addition

2.2 NAME Director

2.3 STREET ADDRESS Ned L. Siegel

2.4 CITY-ST-ZIP 5000 Blue Lake Drive, Suite 100

3.1 TITLE Boca Raton, Florida 33431 ☐ Change ☒ Addition

3.2 NAME Director

3.3 STREET ADDRESS Morris L. Stoltz, II

3.4 CITY-ST-ZIP 5000 Blue Lake Drive, Suite 100

4.1 TITLE Boca Raton, Florida 33431 ☐ Change ☒ Addition

4.2 NAME Director

4.3 STREET ADDRESS Mark A. Guzzetta

4.4 CITY-ST-ZIP 5000 Blue Lake Drive, Suite 100

5.1 TITLE Boca Raton, Florida 33431 ☐ Change ☒ Addition

5.2 NAME Director

5.3 STREET ADDRESS Lawrence J. De George

5.4 CITY-ST-ZIP 5000 Blue Lake Drive, Suite 100

6.1 TITLE Boca Raton, Florida 33431 ☐ Change ☐ Addition

6.2 NAME

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:

MICHAEL D. MASANOFF - DIRECTOR 2/5/98

CR2E034 (10/97)