TITLE

NAME

STREET ADDRESS

SIGNATURE:

CITY-ST-ZIP

FILED FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 May 05 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandre B. Mortham ANNUAL REPORT Secretary of State Secretary of State 1998 **DIVISION OF CORPORATIONS DOCUMENT #**1. Corporation Name P97000029718 (8) THE TOWNHOMES AT CEDAR RIDGE, INC. Principal Place of Business Mailing Address 7000 HIGH RIDGE RD 7000 HIGH RIDGE RD LANTANA FL 33462 LANTANA FL 33462 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 03/31/1997 2. Principal Place of Business 2a. Mailing Address Applied For 21 26 65 - 073619 Not Applicable Suite, Apl. #, etc. Suite, Apt. #, etc. \$8.75 Additional M 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Zip Zip Country 8. This corporation owes or has paid the current year Intangible Yes 24 Personal Property Tax due June 30. 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name BASILE, JOSEPH F JR. 5 OAKWOOD CT Street Address (P.O. Box Number is Not Acceptable) LANTANA FL 33462 83 84 City 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) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE Change **Addition** TITLE 1.1 TITLE BASILE, JOSEPH F JR. 1.2 NAME NAME CR2E034 **5 OAKWOOD CT** STREET ADDRESS 1.3 STREET ADDRESS LANTANA FL 33462 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE **4V/Q** Change **Addition** TITLE 21 TITLE NAME URICH, JEFFREY S 2.2 NAME STREET ADDRESS 1121 SW 19TH AVE 2.3 STREET ADDRESS CITY-ST-ZIP **BOCA RATON FL 33486** 2.4 CITY-ST-ZIP DELETE Change Addition D/S/T TITLE 3.1 TITLE NAME FARIS, DAVID L 3.2 NAME STREET ADDRESS 511 S BROADWAY 3.3 STREET ADDRESS LANTANA FL 33462 CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Addition TITLE 4.1 TITLE NAME 4 2 NAME 4.3 STREET ADORESS STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS **5.3 STREET ADDRESS** CITY - ST - ZIP 5.4 CITY-ST-ZIP DELETE Change Addition

6.1 TITLE

6.2 NAME

14. Thereby 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 roceiver of supplemental 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 roceiver of supplemental 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 roceiver of the corporation of the roceiver of the roceiver of the corporation of the roceiver of

6.3 STREET ADDRESS

561-533-5199