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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000100314 (8) ROCKWOOD REALTY ASSOCIATES, INC.

FILED Apr 27 1998 8:00am Secretary of State



Principal Place of Business Mailing Address 701 U.S. HIGHWAY ONE 701 U.S. HIGHWAY ONE SUITE 402 SUITE 402 N PALM BEACH FL 33408 N PALM BEACH FL 33408 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 11/25/1997 2. Principal Place of Business 4. FEI Number Applied For 983 Not Applicable 21 Suite, Apt. #, etc. \$8.75 Additional Rockwood Realty LU 5. Certificate of Status Desired Fee Required 22 City & State \$5.00 May Be 6. Election Campaign Financing 23 Trust Fund Contribution Added to Fees 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No. Zip Country Countr 29 100 1 24 25 30 Personal Property Tax due June 30. g. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name GARY, JOHN W III 701 U.S. HIGHWAY ONE Street Address (P.O. Box Number is Not Acceptable) **SUITE 402** 83 N PALM BEACH FL 33408 84 City 85 Zip Code 11. Pursuant to the provisions of Soctions 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, Soction 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of impistered agent and title if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. DELETE 1.1 TITLE Change Addition TITLE

MAGEE, JOHN W NAME 1.2 NAME 701 U.S. HIGHWAY ONE, SUITE 402 STREET ADDRESS 1.3 STREET ADDRESS N PALM BEACH FL 33408 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE 2.1 TITLE Change Addition NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY ST ZIP 2.4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE 3.2 NAME NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST - ZIP DELETE 4.1 TITLE Change Addition TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 City-St-ZiP DELETE Change Addition 5.1 TITLE 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 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADORESS CITY-ST-ZIP 6.4 CITY-ST-ZIP

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 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: X

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4/17/98 212-286-5800

R2E034 (10/97)