

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P98000036608

1. Corporation Name
GOLDMARK BUILDERS AT WESTWOOD LAKES, INC.

Principal Place of Business
1325 SOUTH CONGRESS AVENUE
SUITE 100
BOYNTON BEACH FL 33426

Mailing Address
1325 SOUTH CONGRESS AVENUE
SUITE 100
BOYNTON BEACH FL 33426

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
99 JUN 26 PM 1:23



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 04/21/1998	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 65-0843662	Applied For Not Applicable
22	City & State	27	City & State	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
23	Zip	28	Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
24	Country	29	Country	8. This corporation owes the current year Intangible Personal Property Tax. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent ATLANTIS REGISTERED AGENTS, INC. C/O GERALD DAMSKY, P.A. 2285 CORPORATE BOULEVARD, N.W. - SUITE 134 BOCA RATON FL 33431		10. Name and Address of New Registered Agent	
81 Name		82 Street Address (P.O. Box Number is Not Acceptable) 601 NW 53RD ST #365	
83		84 City FL	
85 Zip Code 33487			

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 Gerald Damsky as President of Atlantis Registered Agents, Inc. 6/15/99
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating.) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
<input type="checkbox"/> DELETE		<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE	11 TITLE	C, S	
NAME	12 NAME	RONALD W. GILBOUE	
STREET ADDRESS	13 STREET ADDRESS	1325 S. CONGRESS AVE #100	
CITY-ST-ZIP	14 CITY-ST-ZIP	BOYNTON BEACH, FL 33426	
<input type="checkbox"/> DELETE		<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE	21 TITLE	P, T	
NAME	22 NAME	MARK G. NUCILLI	
STREET ADDRESS	23 STREET ADDRESS	1325 S. CONGRESS AVE #100	
CITY-ST-ZIP	24 CITY-ST-ZIP	BOYNTON BEACH, FL 33426	
<input type="checkbox"/> DELETE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE	31 TITLE		
NAME	32 NAME		
STREET ADDRESS	33 STREET ADDRESS		
CITY-ST-ZIP	34 CITY-ST-ZIP		
<input type="checkbox"/> DELETE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE	41 TITLE	400002948814-1	
NAME	42 NAME	-08/03/99-01041-020	
STREET ADDRESS	43 STREET ADDRESS	****150.00 ****150.00	
CITY-ST-ZIP	44 CITY-ST-ZIP		
<input type="checkbox"/> DELETE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE	51 TITLE		
NAME	52 NAME		
STREET ADDRESS	53 STREET ADDRESS		
CITY-ST-ZIP	54 CITY-ST-ZIP		
<input type="checkbox"/> DELETE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE	61 TITLE		
NAME	62 NAME		
STREET ADDRESS	63 STREET ADDRESS		
CITY-ST-ZIP	64 CITY-ST-ZIP		

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 located 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, with all other like empowered.

NATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6/15/99

Date

561-736-1555

Daytime Phone #

CR2E034 (1/198)

June 15, 1999

To whom this may concern,

I am sending this letter along with a for GoldMark Builders at Westwood Lakes, Inc.. I had placed the report in my tickler file (monthly to be paid file), but during April I was taken ill and underwent tremendous volumes of doctors visits, testing, specialists and such. All of which culminated in my going to Philadelphia for emergency surgery. My staff was forced to assume day to day responsibilities for running my business.

Unfortunately, when I found my health was at risk, I became consumed with this burden and one of the items that was overlooked was the filing of the Annual Report. I just returned to the office today and I am sending in the check and asking the waiver of late fees in light of my health matters. I can document my health items, surgery, recovery and return to work dates. I have suffered terribly in the last few months and apologize for any inconvenience which my tardiness in filing may have caused.

Sincerely,

A handwritten signature in dark ink, appearing to read 'Ron', with a stylized flourish extending from the end.

Ron Goldberg, President GoldMark