## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

changed, or on an attachment with an address, with all other like empowered.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE: .

## **FILED** May 01, 2007 08:00 A Secretary of State DOCUMENT # P98000097545 KIMCO TALLAHASSEE 715, INC. Principal Place of Business Mailing Address 3333 NEW HYDE PARK RD. 3333 NEW HYDE PARK RD. STE 100 **STE 100** NEW HYDE PARK, NY 11042 NEW HYDE PARK, NY 11042 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 02132007 CR2E034 (12/06) Chg-P City & State City & State 4. FE! Number Applied For 59-3551945 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent CT CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 S. PINE ISLAND RD. PLANTATION, FL 33324 City Zip Code 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2007 Fee will be \$550.00 Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. D TITLE ☐ Delete TITLE ☐ Addition COOPER, MILTON NAME NAME U000000750606 3333 NEW HYDE PARK RD. STREET ADDRESS STREET ADDRESS 05/18/07-80069-014 150.00 CITY-ST-ZIP NEW HYDE PARK, NY 11042 CITY-ST-ZIP TITLE Delete TITLE Change Addition SCHINDLER, MICHAEL NAME NAME STREET ADDRESS 3333 NEW HYDE PARK RD. STREET ADDRESS CITY-ST-ZIP NEW HYDE PARK, NY 11042 CITY-ST-ZIP TITLE Delete TITLE Change ☐ Addition FLYNN, MICHAEL J NAME NAME STREET ADDRESS 3333 NEW HYDE PARK RD. STREET ADDRESS CITY-ST-ZIP NEW HYDE PARK, NY 11042 CITY-ST-7IP TITLE Delete TITI F Change Addition NAME PAPPAGALLO, MICHAEL NAME STREET ADDRESS 3333 NEW HYDE PARK RD., P.O. BOX 5020 STREET ADDRESS CITY - ST- ZIP NEW HYDE PARK, NY 11042 CITY+ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME YARMAK, JOEL I NAME STREET ADDRESS 3333 NEW HYDE PARK RD STREET ADDRESS CITY - ST-ZIP NEW HYDE PARK, NY 11042 CITY-ST-ZIP TITLE ☐ Delete TITI F Change ☐ Addition NAME COHEN, GLENN NAME STREET ADDRESS 3333 NEW HYDE PARK RD STREET ADDRESS CITY-ST-ZIP NEW HYDE PARK, NY 11042 CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if