

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

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May 05, 1999 8:00 am
Secretary of State

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PROFIT CORPORATION
ANNUAL REPORT
1999

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



DOCUMENT # P98000105750

1. Corporation Name
GORDON HOMES XXV, INC.

Principal Place of Business
4000 N. FEDERAL HIGHWAY STE. 201
BOCA RATON FL 33431

Mailing Address
4000 N. FEDERAL HIGHWAY STE. 201
BOCA RATON FL 33431



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	2a. Mailing Address
21 4000 N. Federal Hwy	26 4000 N. Federal Hwy
Suite, Apt. #, etc.	Suite, Apt. #, etc.
22 208	27 208
City & State	City & State
23 Boca Raton, FL	28 Boca Raton, FL
Zip Country	Zip Country
24 33431 US	29 33431 US

3. Date Incorporated or Qualified 12/18/1998	Applied For Not Applicable
4. FEI Number 65-0888774	
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation owes the current year Intangible Personal Property Tax. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

LEVINE, JEFFREY A
4000 N. FEDERAL HIGHWAY STE. 201
BOCA RATON FL 33431

10. Name and Address of New Registered Agent

81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	FL
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LEVINE, JEFFREY A	1.2 NAME	
STREET ADDRESS	4000 N. FEDERAL HIGHWAY STE. 201	1.3 STREET ADDRESS	
CITY-ST-ZIP	BOCA RATON FL 33431	1.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		2.2 NAME	DS Gordon, Gary
STREET ADDRESS		2.3 STREET ADDRESS	4000 N. Federal Hwy #208
CITY-ST-ZIP		2.4 CITY-ST-ZIP	Boca Raton, FL 33431
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		3.2 NAME	PD Gordon, Robert
STREET ADDRESS		3.3 STREET ADDRESS	4000 N. Federal Hwy #208
CITY-ST-ZIP		3.4 CITY-ST-ZIP	Boca Raton, FL 33431
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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, with all other like empowered.

SIGNATURE: _____ DATE: 4-22-99 DAYTIME PHONE: 561-338-8900