

2000 UNIFORM BUSINESS REPORT (UBR)**FILED****May 18, 2000 8:00 am**
Secretary of State

05-18-2000 90302 002 ***158.75

DOCUMENT # P99000091382

1. Entity Name

G.L. HOMES OF SUNSET LAKES CORPORATION

Principal Place of Business

Mailing Address

**1401 UNIVERSITY DRIVE SUITE 200
CORAL SPRINGS FL 33071****1401 UNIVERSITY DRIVE SUITE 200
CORAL SPRINGS FL 33071-6088**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0958602

Applied For

Not Applicable

5. Certificate of Status Desired

**\$8.75** Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent**7. Name and Address of New Registered Agent****GRANT, MARK F ESQ
200 EAST BROWARD BLVD., 15TH FLOOR
FORT LAUDERDALE FL 33301**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐**FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State**10. Election Campaign Financing
Trust Fund Contribution. ☐**\$5.00** May Be
Added to Fees**11. OFFICERS AND DIRECTORS****12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		NAME	EZRATTI, ITZHAK
STREET ADDRESS		STREET ADDRESS	1401 UNIVERSITY DRIVE, SUITE 200
CITY-ST-ZIP		CITY-ST-ZIP	CORAL SPRINGS, FL 33071
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		NAME	FANT, ALAN J.
STREET ADDRESS		STREET ADDRESS	1401 UNIVERSITY DRIVE, SUITE 200
CITY-ST-ZIP		CITY-ST-ZIP	CORAL SPRINGS, FL 33071
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		NAME	COSTELLO, RICHARD A.
STREET ADDRESS		STREET ADDRESS	1401 UNIVERSITY DRIVE, SUITE 200
CITY-ST-ZIP		CITY-ST-ZIP	CORAL SPRINGS, FL 33071
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		NAME	NORWALK, RICHARD M.
STREET ADDRESS		STREET ADDRESS	1401 UNIVERSITY DRIVE, SUITE 200
CITY-ST-ZIP		CITY-ST-ZIP	CORAL SPRINGS, FL 33071
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		NAME	S EZRATTI, MOSHE
STREET ADDRESS		STREET ADDRESS	1401 UNIVERSITY DRIVE, SUITE 200
CITY-ST-ZIP		CITY-ST-ZIP	CORAL SPRINGS, FL 33071
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		NAME	V ARKIN, RICHARD
STREET ADDRESS		STREET ADDRESS	1401 UNIVERSITY DRIVE, SUITE 200
CITY-ST-ZIP		CITY-ST-ZIP	CORAL SPRINGS, FL 33071

13. 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/25/00

Date

954-753-1730

Daytime Phone #

RICHARD M. NORWALK, VICE PRESIDENT

C:\E014 19/99