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

FILED Mar 14 1997 8:00am PROFIT! FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State 1997 DIVISIÓN OF CORPORATIONS DOCUMENT # S05023 (4)LEVITT REALTY SERVICES, INC. Principal Place of Business Mailino Address 6432 HUNTINGTON LAKES CIR. 6432 HUNTINGTON LAKES CIR. #104 NAPLES FL 34119-8971 NAPLES FL 33999 3. Date Incorporated or Qualified 3a. Date of Last Report 10/10/1990 03/04/1996 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 59-3032011 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution 23 Added to Fees 28 Zip Country Country 8. This corporation has liability for intangible tax under s. 199.032. ☐ Yes ☐ No 24 25 Florida Statutes 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent THE PRENTICE-HALL CORPORATION SYSTEM INC. Name 110 NORTH MAGNOLIA 82 Street Address (P.O. Box Number is Not Acceptable) TALLAHASSEE FL 32301 83 84 City 85 Zip Code 11. Pursuant to the provisions of Sections 607.05.02 and 607.15.08, 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 (NOT) Fire gistered. Agent signature required when relistating). DATE Signature, typicd or printed name of registered agent and little if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. 96/6) DELETE Change Addition 1.1 HHE TITLE WIENER, ELLIOTT M NAME 1.2 NAME 7777 GLADES RD., STE 410 STREET ADDRESS 1.3 STREET ADDRESS **BOCA RATON FL** 1.4 CHY+ \$1 - ZIP CITY-ST-ZIP DELETE Change Addition TITLE 2.1 11111.5 HOYOS, JEFFREY 2.2 NAME NAME 7777 GLADES ROAD, SUITE 410 STREET ADDRESS 2.3 STREET ADDRESS **BOCA RATON FL 33434** CITY-ST-ZIP 2 4 Cily - \$1 - 7IP DETETE T Addition Change 3.1 1111 TITLE FAGAN, PETER F 3.2 NAME NAME 7777 GLADES RD., STE 410 STREET ADDRESS 3.3 STREET ADDRESS **BOCA RATON FL** 3 4. CITY - ST - ZIP CITY-ST-ZIP DELETE Addition TITLE SD 4.1 11111 Change WEST, ALFRED G NAME 4.2 NAMI 7777 GLADES RD, STE 410 STREET ADDRESS 4.3 STREET ADDRESS **BOCA RATON FL** CITY-ST-ZIP 4.4 CitY - ST - 7IP Docume Change Addition 5.1 THEE TITLE 5.2 NAME

CITY-ST-ZIP 14. I do hereby certify that the information supplied information indicated on this annual report or shift am an officer or director of the corporation or trappears in Block 12 or Block 13 if changes or continuous. d with this filling does not qualify for the exemption stated in Section 119 07(3)(i), Florida Statules. I further certify that the application of the same legal effect as if made under eath; that the same legal effect as if made under eath; that the reserver or trustee empowered to execute this report as required by Chapter 607, Florida Statules; and that my name

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CHY-S1-7/P

6 1 111t F

6.2 NAME

DELETE

SIGNATURE:

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

12/12/14/06/SVP 2-7-97 561-480-5100

Change

Addition