## FILED 2000 UNIFORM BUSINESS REPORT (UBR) May 31, 2000 8:00 am Secretary of State DOCUMENT # 5 0 5 0 2 3 1. Entity Name 05-31-2000 90098 019 \*\*\*150.00 LEVITT REALTY SERVICES, INC. Mailing Address Principal Place of Business 6550 HUNTINGTON LAKES CIR 6550 HUNTINGTON LAKESCIR NAPLES, FL 34119 NAPLES, FL 34119 103951 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State 4. FEI Number Applied For City & State 59-3032011 Not Applicable 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 CORPORATION SERVICE COMPANY Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STR. TALLAHASSEE, FL 32301 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. SIGNATURE . Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550,00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS CR2E034 (9/99) Change ☐ Addition TITLE ☐ Delete TITLE NAME ALFRED WEST STREET ADDRESS ESSO HUNTINGTON LAKES CIR, # 104 STREET ADDRESS CITY-ST-ZIP NAPLES FL 34119 ☐ Delete ☐ Change Addition TITLE NAME JAHA SHAW STREET ADDRESS STREET ADDRESS 6550 HUNTINGTON LAKES CIR, # 104 CITY-ST-ZIP CITY-ST-ZIP MAPLES FL 34119 TITLE ☐ Change ■ Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE Delete NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition TITLE Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Delete TITLE TITLE Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 13. Thereby 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 SIGNATURE:

Mailing Address

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**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

૱૦૬ Secretary of State **DIVISION OF CORPORATIONS** 

103951

Applied For

Not Applicable

DOCUMENT Corporation Name /

Principal Place of Business --- HUNTINGTON LAKES CIR.

2. Principal Place of Business

LLG FL 33999

LEVITT REALTY SERVICES, INC.

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59-3032011

-6492 HUNTINGTON LAKES CIR. DO NOT WRITE IN THIS SPACE NAPLES FL 32999 34/19 3. Date Incorporated or Qualifed 10/10/1990 2a. Mailing Address 4. FEI Number

\$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 27 City & State \$5.00 May Be City & State 6. Election Campaign Financing Trust Fund Contribution Added to Fees 28 Country Zip Country Zio 8. This corporation owes the current year Intangible □No Personal Property Tax. 30 25 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Name CORPORATION SERVICE COMPANY Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS ST. TALLAHASSEE FL 32301

irsuant 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 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.

84 City

SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. DELETE 1.1 TITLE TITLE 1.2 NAME WIENER, ELLIOTT M NAME ċ 7777 GLADES RD., STE 410 1.3 STREET ADDRESS STREET ADDRESS **BOCA RATON FL** 1,4 CITY-ST-ZIP CITY-ST-ZIP ☐ Addition Change ☐ DELETE TITLE HOYOS, JEFFREY 22 NAME 7777 GLADES ROAD, SUITE 410 2.3 STREET ADDRESS STREET ADDRESS **BOCA RATON FL 33434** 2. 4 CITY-ST-ZIP CITY+ST-ZIP ☐ Addition ☐ Change DELETE 317ME TITLE FAGAN, PETER F 3.2 NAME NAME 7777 GLADES RD., STE 410 3.3 STREET ADDRESS STREET ADDRESS **BOCA RATON FL** 3.4. CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Change DELETE 4.1 TITLE TITLE WEST, ALFRED G 4. 2 NAME NAME 7777 GLADES RD, STE 410 STREET ADDRESS 4.3 STREET ADDRESS **BOCA RATON FL** 4.4 CITY-ST-ZIP CITY-S7-ZIP ☐ Addition ☐ DELETE 51 TITLE 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS 54 CITY-ST-ZIP CITY-ST-ZIP ☐ Addition OELETE S. ITTLE TITLE

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.

6.2 NAME 6.3 STREET ADDRESS

SIGNATURE:

. FADDRESS