FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

95 APR 27 PM 1:28

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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DOCUMENT # **S12843** **(6)**

1. Corporation Name
G.L. HOMES OF PEBBLE POINTE CORPORATION

Principal Place of Business	Mailing Address
1401 UNIVERSITY DR. SUITE 200 CORAL SPRINGS FL 33071	1401 UNIVERSITY DR. SUITE 200 CORAL SPRINGS FL 33071

3. Date Incorporated or Qualified: **11/15/1990**
3a. Date of Last Report: **04/25/1994**

2. Principal Place of Business (21)
2a. Mailing Address (26)
4. FEI Number: **65-0231736** ☐ Applied For ☐ Not Applicable
Suite, Apt. #, etc. (22) (27)
5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required
City & State (23) (28)
6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees
Zip (24) Country (25) Zip (29) Country (30)
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

EZRATTI, ITZHAK
1401 UNIVERSITY DRIVE
SUITE 200
CORAL SPRINGS FL 33071

10. Name and Address of New Registered Agent

81 Name: MARK GRANT C/O RUDEN BARNETT
82 Street Address (P.O. Box Number is Not Acceptable): 200 E. BROWARD BOULEVARD
83
84 City: FT LAUDERDALE FL 85 Zip Code: 33302

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: Mark T. Grant 4/26/95
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	DP	11 TITLE		☐ Change ☐ Addition
NAME	EZRATTI, ITZHAK	12 NAME		
STREET ADDRESS	1401 UNIVERSITY DR.,#200	13 STREET ADDRESS		
CITY-ST-ZIP	CORAL SPRINGS FL	14 CITY-ST-ZIP		
TITLE	VAS	21 TITLE		☐ Change ☐ Addition
NAME	FANT, ALAN J.	22 NAME		
STREET ADDRESS	1401 UNIVERSITY DR, #200	23 STREET ADDRESS		
CITY-ST-ZIP	CORAL SPRINGS FL	24 CITY-ST-ZIP		
TITLE	VT	31 TITLE		☐ Change ☐ Addition
NAME	COSTELLO, RICHARD A.	32 NAME		
STREET ADDRESS	1401 UNIVERSITY DR, #200	33 STREET ADDRESS		
CITY-ST-ZIP	CORAL SPRINGS FL	34 CITY-ST-ZIP		
TITLE	S	41 TITLE		☐ Change ☐ Addition
NAME	EZRATTI, MOSHE	42 NAME		
STREET ADDRESS	1401 UNIVERSITY DR, #200	43 STREET ADDRESS		
CITY-ST-ZIP	CORAL SPRINGS FL	44 CITY-ST-ZIP		
TITLE	V	51 TITLE		☐ Change ☐ Addition
NAME	NORWALK, RICHARD M	52 NAME		
STREET ADDRESS	1401 UNIVERSITY DR #200	53 STREET ADDRESS		
CITY-ST-ZIP	CORAL SPGS FL	54 CITY-ST-ZIP		
TITLE		61 TITLE		☐ Change ☐ Addition
NAME		62 NAME		
STREET ADDRESS		63 STREET ADDRESS		
CITY-ST-ZIP		64 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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.

SIGNATURE: 4/6/95 305 753-1770
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #
Richard M. Norwalk - V.P

0114076 CP