

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 APR -4 AM 10:49

DOCUMENT # **S17099** (0)

1. Corporation Name

STIRLING LAKE ASSOCIATES, INC.

Principal Place of Business

3109 STIRLING RD
STE 200
HOLLYWOOD FL 33312

Mailing Address

3109 STIRLING RD
STE 200
HOLLYWOOD FL 33312

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/07/1990

3a. Date of Last Report

04/08/1994

4. FEI Number

65-0235188

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business

21 3109 Stirling Rd.

2a. Mailing Address

26 3109 Stirling Rd.

Suite, Apt. #, etc.

22 Suite 200

Suite, Apt. #, etc.

27 Suite 200

City & State

23 Ft. Lauderdale, FL

City & State

28 Ft. Lauderdale, FL

Zip

24 33312

Country

25 Broward

Zip

29 33312

Country

30 Broward

9. Name and Address of Current Registered Agent

SINGER, BERNARD A
4700 SHERIDAN ST
SUITE B
HOLLYWOOD FL 33021

10. Name and Address of New Registered Agent

B1 Name

B2 Street Address (P.O. Box Number is Not Acceptable)

B3

B4 City

FL

B5 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

Signature, typed or printed name of registered agent and title of agent

(a)(1) Registered Agent signature required when reappointing

DATE

12. OFFICERS AND DIRECTORS

TITLE PST
NAME HOLLANDER, WALTER J
STREET ADDRESS 3109 STIRLING RD #200
CITY- ST- ZIP FT. LAUDERDALE FL

TITLE VT
NAME HOLLANDER, DAVID
STREET ADDRESS 3109 STIRLING RD. #200
CITY- ST- ZIP FT. LAUDERDALE FL

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY- ST- ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY- ST- ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY- ST- ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY- ST- ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY- ST- ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 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)(b), 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 in an attached list with an address.

SIGNATURE:

DAVID G. HOLLANDER VICE PRESIDENT

3-30-95

305.962.9700