

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION ANNUAL REPORT 1995		FLORIDA DEPARTMENT OF STATE Sandra B. Northam Secretary of State DIVISION OF CORPORATIONS
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**FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS**

DOCUMENT # S36387 (6)

95 APR 17 PM 11:20

1. Corporation Name

FAIRWAY BOCA, INC.

Principal Place of Business

**4000 HOLLYWOOD BLVD.
SUITE 770-N
HOLLYWOOD FL 33021**

Mailing Address

**4000 HOLLYWOOD BLVD
MANAGEMENT OFFICE
HOLLYWOOD FL 33021
US**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

03/06/1991

3a. Date of Last Report

02/18/1994

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

4. FEI Number

65-0254019

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

☐

**\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes

☐ Yes

☐ No

9. Name and Address of Current Registered Agent

**CT CORPORATION SYSTEM
1200 S PINE ISLAND RD
PLANTATION FL 33324**

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1506, 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 if applicable

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

TITLE	D
NAME	RABINOVITCH, ROBERT
STREET ADDRESS	1170 PEEL ST
CITY - ST - ZIP	MONTREAL QU
TITLE	D
NAME	PARSONS, ANDREW J
STREET ADDRESS	1170 PEEL ST
CITY - ST - ZIP	MONTREAL QU
TITLE	D
NAME	DOYLE, RICHARD P
STREET ADDRESS	1170 PEEL ST
CITY - ST - ZIP	MONTREAL QU
TITLE	AS
NAME	ABRAMS, R. J
STREET ADDRESS	5 PLACE VILLE MARIE
CITY - ST - ZIP	MONTREAL QU
TITLE	OV
NAME	WESTGATE, ROSS
STREET ADDRESS	4000 HOLLYWOOD BLVD.
CITY - ST - ZIP	HOLLYWOOD FL
TITLE	DS
NAME	COURTENALL, PAUL
STREET ADDRESS	4000 HOLLYWOOD BLVD.
CITY - ST - ZIP	HOLLYWOOD FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	PD	☒ Change ☐ Addition
1.2 NAME	LUDWICK, ARNOLD M.	
1.3 STREET ADDRESS	1170 PEEL STREET	
1.4 CITY - ST - ZIP	MONTREAL, QUEBEC H3B4P2	
2.1 TITLE	EVD	☒ Change ☐ Addition
2.2 NAME	PARSONS, ANDREW J.	
2.3 STREET ADDRESS	1170 PEEL STREET	
2.4 CITY - ST - ZIP	MONTREAL, QUEBEC H3B4P2	
3.1 TITLE	VD	☒ Change ☐ Addition
3.2 NAME	DOYLE, RICHARD P.	
3.3 STREET ADDRESS	1170 PEEL STREET	
3.4 CITY - ST - ZIP	MONTREAL, QUEBEC H3B4P2	
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY - ST - ZIP		
5.1 TITLE	SVD	☒ Change ☐ Addition
5.2 NAME	LOU, GERALD E.	
5.3 STREET ADDRESS	4000 HOLLYWOOD BOULEVARD	
5.4 CITY - ST - ZIP	HOLLYWOOD, FL 33021	
6.1 TITLE	S	☒ Change ☐ Addition
6.2 NAME	COURTNELL, PAUL	
6.3 STREET ADDRESS	777 SOUTH FLAGLER DRIVE, SUITE 500E	
6.4 CITY - ST - ZIP	WEST PALM BEACH, FL 33401	

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)(k), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Gerald E. Lou

Senior Vice-President 3/14/90

DATE

DATE

(305) 981-8288

00000000 CP

536387

**CORPORATION ANNUAL REPORT
1995**

ADDITIONAL OFFICERS AND DIRECTORS

TITLE:	D
NAME:	RABINOVITCH, ROBERT
STREET ADDRESS:	1170 PEEL STREET
CITY, STATE, ZIP:	MONTREAL, QUEBEC H3B4P2