Apr 23, 1999 8:00 am Secretary of State

04-23-1999 90030 022 ***150.00

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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # S55375

FIRST FLORIDA PROPERTY MANAGEMENT, INC.

Principal Place of Business Mailing Address						
337 E INDIANTOWN RD 337 E INDIANTOWN RD						•
SUITE 8 SUITE 8						DO NOT MORE IN THE DOAGE
JUPITER FL 33477 JUPITER FL 33477						DO NOT WRITE IN THIS SPACE
us us						3. Date Incorporated or Qualifed
Principal Place of Business 2a. Mailing Address						05/24/1991 4. FEI Number Applied For
┝═╗ ` . ├ ╗						65-0266986 Not Applicable
21 26 Suite, Apt. #, etc. Suite, Apt. #, etc.						_ \$8.75 Additional
22 27						5. Certificate of Status Desired Fee Required
City & State		City & State	City & State			6. Election Campaign Financing 5.00 May Be
23	28				Trust Fund Contribution Added to Fees	
Zíp Country Zip			Country			8. This corporation owes the current year Intangible
24	24 25 29 29 30					Personal Property Tax.
	9. Name and Address of Curre	nt Registered Agent	<u> </u>			10. Name and Address of New Registered Agent
55.1	HOLTZ OTTWART F		81	Na	me	
DENHOLTZ, STEWART F.				Ştr	eet Addr	ress (P.O. Box Number is Not Acceptable)
337 E INDIANTOWN ROAD				1		
SUITE 8			83			
JUPI	TER FL 33477		84	Cit	у	FL 85 Zip Code
				<u> </u>		
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 ag	ANOTE: Po	ristand Ann	nt sign:	turo reguiro	od when reinstating) DATE
12.		ND DIRECTORS	13.	iii aigiii	tare regone	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	Р	DELETE	1.1 TITLE		$\neg \neg$	Change Addition
NAME	DENHOLTZ, JACK W.		1.2 NAME		ſ	
STREET ADDRESS	337 E. INDIANTOWN RD		1.3 STREE	T ADDR	ESS	
CITY-ST-ZIP	JUPITER FL		14 CITY-S	T-ZIP		
TITLE	TS	☐ DELETE	2.1 TITLE			Change Addition
NAME	DENHOLTZ, STEVEN		2.2 NAME			!
STREET ADDRESS	337 E INDIANTOWN RD		2.3 STREE		tess	
CITY-ST-ZIP	JUPITER FL		2.4 CITY-	ST-ZIP		
TITLE	VP	☐ DELETE	3.1 TITLE			☐ Change · ☐ Addition
NAME	DENHOLTZ, STEWART		3.2 NAME			
STREET ADDRESS	337 E INDIANTOWN RD		3.3 STREET		(ESS	
CITY-ST-ZIP	JUPITER FL		3.4 CITY-5			Change Addition
TITLE		☐ DELETE	4.1 TITLE			☐ Change ☐ Addition
NAME		·	4. 2 NAME			
STREET ADDRESS			4.3 STREE		ESS	
CITY-ST-ZIP		DELETE	4.4 CITY-5	T-ZIP	+	☐ Change ☐ Addition
TILE		C) Nereit	5.1 TITLE 5.2 NAME		1	
NAME		İ	5.3 STREE		_{RESS}	
STREET ADDRESS			5.4 CITY-S		-33	
CITY-ST-ZIP			6.1 TITLE		+	☐ Change ☐ Addition
TITLE		C) pescie	6.2 NAME			
NAME OTDEET ADODESS		į	6.3 STREE		KESS	
STREET ROUNCOS				CITY-ST-ZIP		
CITY-ST-ZIP	i e				1	

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.

SIGNATURE:

SIGNAC