May 01 1998 8:00am Secretary of State

FILED

FILE NOW: FILING	i FEE AFTER	MAY 1ST	18 \$550.00
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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(7)

ALTA DEVELOPMENT, INC.

Principal Place of Business Mailing Address				. Lindindië siy indin trong digit bidit gadt dibit bidi	ı oldıy didii bidil əfeti (40)		
555 S. FEDERAL HIGHWAY SUITE 350 BOCA RATON FL 33432		555 S. FEDERAL HIGHWAY SUITE 350 BOCA RATON FL 33432		DO NOT WRITE IN THIS	SPACE		
US		US				3. Date incorporated or Qualified	
						08/08/1991	
2. Principal Pla	ice of Business	2s. Mailing Ad	idress			4. FEI Number	Applied For
1		26				65-0282547	Not Applicable
Suite, Apt. #	, etc.	Suite, Apt.	#, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & Stat	te			Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip 4	Country 25	Zip 29	30	intry		This corporation owes or has paid the cu Personal Property Tax due June 30.	rent year Intangible
9. Name and Address of Current Registered Agent					10. Name and Address of New Registered	Agent	
	NET, LLOYD ESQ.			81	Name		
5200 TOWN CENTER CIRCLE #301 BOCA RATON FL 33482		82	2 Street Address (P.O. Box Number is Not Acceptable)				
				83			
				84	City	FL	85 Zip Code

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.

	and decopy the obligation	210 01, Ocollon 601.0503, 1101	ida Olalalas.				
SIGNATURE							
Signature, typod or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) DATE							
12.	OFFICERS AND I		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	D	☐ DELETE	1.1 TITLE	Change Addition			
NAME	NEWMAN, MARY KAY		1.2 NAME				
STREET ADDRESS	22180 ENSENADA WAY		1.3 STREET ADDRESS	555 S. Federal Highway, Suite 350 Boca Raton, FL 33432			
CITY-ST-ZIP	BOCA RATON FL		1.4 CITY - ST - ZIP	Boca Raton, FL 33432			
TITLE	D	☐ DELETE	2.1 TITLE	Change Addition			
NAME	NEWMAN, FREDERIC D.		2.2 NAME				
STREET ADDRESS	22180 ENSENADA WAY		2.3 STREET ADDRESS	555 S. Federal Highway, Suite 350			
CITY-ST-ZIP	BOCA RATON FL		2.4 CITY-ST-ZIP	Boca Raton, FL 33432			
TITLE	D	DELETE	31 TITLE				
NAME	NEWMAN, THEODORE		3.2 NAME				
STREET ADDRESS	2300 GLADES RD		3.3 STREET ADDRESS	555 S. Federal Highway, Suite 350 Boca Raton, FL 33432			
CITY-ST-ZIP	BOCA RATON FL		3.4. CITY-ST-ZIP	Boca Raton, FL 33432			
TITLE		☐ DELETE	4.1 TITLE	Change Addition			
NAME			4. 2 NAME				
STREET ADDRESS			4.3 STREET ADORESS				
CITY-ST-ZIP			4.4 CITY - ST - ZIP				
TITLE		☐ D€LETE	5.1 TITLE	☐ Change ☐ Addition			
NAME			5.2 NAME				
STREET ADDRESS			5.3 STREET ADDRESS				
CITY-ST-ZIP			5.4 CITY-ST-ZIP				
TITLE		☐ DELETE	61 TITLE	Change Addition			
NAME			6.2 NAME				
STREET ADDRESS			6.3 STREET ADDRESS				
CITY OT 710			4 4 0 774 07 710				

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 supplied entail 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 or an attachment with an address.

SIGNATURE:

4/24/08 (4/1)394,5000