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PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **S85676** (2)
1. Corporation Name
ATLANTIC GULF COMMUNITIES SERVICE CORPORATION



Principal Place of Business

Mailing Address

LEGAL DEPT. 9TH FLOOR
2601 S BAYSHORE DR
MIAMI FL 33133-2461

LEGAL DEPT. 9TH FLOOR
2601 S BAYSHORE DR
MIAMI FL 33133-2461

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

25 Country

28 Zip

30 Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

LANGLEY, MARCIA H
LEGAL DEPT. 9 FL
2601 S BAYSHORE DR
MIAMI FL 33133

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 607.1508, 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 in ink of registered agent (if applicable)

NOTE: Registered Agent signature required when reconstituting

DATE

12. OFFICERS AND DIRECTORS

OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	NAME	STREET ADDRESS	CITY-STATE-ZIP	DELETE
DP	JEFFREY, THOMAS W.	2601 S. BAYSHORE DRIVE	MIAMI FL	☐
VS	LANGLEY, MARCIA H.	2601 S. BAYSHORE DRIVE	MIAMI FL	☐
VT	FISCHER, JOHN H.	2601 S. BAYSHORE DRIVE	MIAMI FL	☐
DVC	MIKESH, LINDA A	2601 S. BAYSHORE DRIVE	MIAMI FL	☒
DVAS	GONZALEZ, JULIO J	2601 S BAYSHORE DR	MIAMI FL 33133	☒
				☐

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY-STATE-ZIP	2.1 TITLE	2.2 NAME	2.3 STREET ADDRESS	2.4 CITY-STATE-ZIP	3.1 TITLE	3.2 NAME	3.3 STREET ADDRESS	3.4 CITY-STATE-ZIP	4.1 TITLE	4.2 NAME	4.3 STREET ADDRESS	4.4 CITY-STATE-ZIP	5.1 TITLE	5.2 NAME	5.3 STREET ADDRESS	5.4 CITY-STATE-ZIP	6.1 TITLE	6.2 NAME	6.3 STREET ADDRESS	6.4 CITY-STATE-ZIP
VSD	Langley, Marcia H.	2601 S. Bayshore Drive	Miami, FL 33133	VAS	Goldman, Joel K	2601 S Bayshore Drive	Miami, FL 33133	VD	Carleton, Callis N.	2601 S. Bayshore Drive	Miami, FL 33133												

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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

4-12-96

305-859-4071

Date

Daytime Phone

CR2E034 (12/95)