

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Sep 13, 2005 8:00 am
Secretary of State

09-13-2005 90002 047 ***150.00

DOCUMENT # V14638

1. Entity Name

JALMARK REALTY, INC. AT PEMBROKE LAKES



Principal Place of Business

1721 NW 103RD AVE
PEMBROKE PINES, FL 33026

Mailing Address

1721 NW 103RD AVE
PEMBROKE PINES, FL 33026

50066651



2. Principal Place of Business

10400 Taft St.

3. Mailing Address

10400 Taft St.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

07282005

Chg-P

CR2E034 (10/03)

City & State

Pembroke Pines, FL

City & State

Pembroke Pines, FL

Zip

33026

Country

USA

Zip

33026

Country

USA

4. FEI Number

65-0317284

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

PROCTER, BRUCE V
1051 SW 115TH AVE
PEMBROKE PINES, FL 33025

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
Due by September 7, 2005**

9. Election Campaign Financing
Trust Fund Contribution. ☐

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

In accordance with s. 607.193(2)(b), F.S., the
corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE PSTD ☐ Delete
NAME PROCTER, BRUCE V
STREET ADDRESS 10551 SW 115 AVE
CITY-ST-ZIP PEMBROKE PINES, FL 33025

TITLE SV ☐ Delete
NAME PROCTER, BRUCE V
STREET ADDRESS 1051 SW 115 AVE.
CITY-ST-ZIP PEMBROKE PINES, FL 33025

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Bruce V Procter

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8/15/05

954-472-9144

Date

Daytime Phone #