

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

CORPORATION
ANNUAL REPORT
1995



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

DOCUMENT # **V40418** (8)
1. Corporation Name
G.L. HOMES OF RAINBOW LAKES III CORPORATION

Principal Place of Business
**1401 UNIVERSITY DR
SUITE 200
CORAL SPRINGS FL 33071**

Mailing Address
**1401 UNIVERSITY DR
SUITE 200
CORAL SPRINGS FL 33071**

APPROVED
AND
FILED

95 APR 27 PM 1:04

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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-05/01/95--01086--008
******200.00 ****200.00**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified 05/29/1992	3a. Date of Last Report 04/22/1994
4. FEI Number 65-0336615	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
9. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No	

2. Principal Place of Business 21	2a. Mailing Address 26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24	Country 25
Zip 29	Country 30

9. Name and Address of Current Registered Agent
**EZRATTI, ITZHAK
1401 UNIVERSITY DR
SUITE 200
CORAL SPRINGS FL 33071**

10. Name and Address of New Registered Agent
81 Name MARK GRANT C/O RUDEN BARNETT
82 Street Address (P.O. Box Number is Not Acceptable) 200 E. BROWARD BOULEVARD
83
84 City FT. LAUDERDALE
85 Zip Code FL 33302

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 *Mark F. Grant* DATE **4/26/95**

12. OFFICERS AND DIRECTORS	
TITLE	PDR
NAME	EZRATTI, ITZHAK
STREET ADDRESS	1401 UNIVERSITY DR. #200
CITY, ST, ZIP	CORAL SPRINGS FL
TITLE	VS
NAME	FANT, ALAN
STREET ADDRESS	1401 UNIVERSITY DR. #200
CITY, ST, ZIP	CORAL SPRINGS FL
TITLE	VT
NAME	COSTELLO, RICHARD A
STREET ADDRESS	1401 UNIVERSITY DR. #200
CITY, ST, ZIP	CORAL SPRINGS FL
TITLE	S
NAME	EZRATTI, MOSHE
STREET ADDRESS	1409 UNIVERSITY DR. #200
CITY, ST, ZIP	CORAL SPRINGS FL
TITLE	VP
NAME	NORWALK, RICHARD M.
STREET ADDRESS	1401 UNIVERSITY DR #200
CITY, ST, ZIP	CORAL SPRINGS FL
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
11 TITLE	☐ Change ☐ Addition
12 NAME	
13 STREET ADDRESS	
14 CITY, ST, ZIP	
21 TITLE	☐ Change ☐ Addition
22 NAME	
23 STREET ADDRESS	
24 CITY, ST, ZIP	
31 TITLE	☐ Change ☐ Addition
32 NAME	
33 STREET ADDRESS	
34 CITY, ST, ZIP	
41 TITLE	☒ Change ☐ Addition
42 NAME	
43 STREET ADDRESS	1401 University Dr., #200
44 CITY, ST, ZIP	
51 TITLE	☐ Change ☐ Addition
52 NAME	
53 STREET ADDRESS	
54 CITY, ST, ZIP	
61 TITLE	☐ Change ☐ Addition
62 NAME	
63 STREET ADDRESS	
64 CITY, ST, ZIP	

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 included 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: *Richard M. Norwalk* DATE **4/6/95** TELEPHONE **365-753-1730**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Richard M. Norwalk - V.P