

FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **705769** (8)

1. Corporation Name
REGENCY HOUSE, INC.



Principal Place of Business: 2829 N.E. 30TH STREET FORT LAUDERDALE, FL 33306-1953
Mailing Address: 2829 N.E. 30TH STREET FORT LAUDERDALE, FL 33306-1953

3. Date Incorporated or Qualified: **06/17/1963**
3a. Date of Last Report: **05/01/1995**
4. FEI Number: **59-1159328**
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**
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

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

9. Name and Address of Current Registered Agent
**PIRICH, DIANA E.
2419 MIDDLE RIVER DR
FORT LAUDERDALE FL 33305**

10. Name and Address of New Registered Agent
81 Name: **VARTANIAN, JANICE E.**
82 Street Address (P.O. Box Number is Not Acceptable): **2829 N.E. 30TH STREET**
83 City: **FORT LAUDERDALE**
84 City: **FL** 85 Zip Code: **33306**

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered officer 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 617.0503, Florida Statutes.

SIGNATURE: *Janice E. Vartanian* **President** DATE: **Feb. 23, 1996**

12. OFFICERS AND DIRECTORS

TITLE	DP	<input checked="" type="checkbox"/> DELETE
NAME	PIRICH, DIANA E.	
STREET ADDRESS	2419 MIDDLE RIVER DR	
CITY-ST-ZIP	FT LAUDERDALE, FL 00000	
TITLE	DV	<input checked="" type="checkbox"/> DELETE
NAME	FALCETTA, ELIZABETH	
STREET ADDRESS	2829 NE 30TH ST	
CITY-ST-ZIP	FT LAUDERDALE, FL 00000	
TITLE	DTS	<input type="checkbox"/> DELETE
NAME	WALSH, GERTRUDE F.	
STREET ADDRESS	2829 NE 30TH ST	
CITY-ST-ZIP	FT LAUDERDALE, FL 00000	
TITLE	ASD	<input type="checkbox"/> DELETE
NAME	VARTANIAN, JANICE E.	
STREET ADDRESS	2829 NE 30TH ST	
CITY-ST-ZIP	FT LAUDERDALE, FL 00000	
TITLE	ATD	<input type="checkbox"/> DELETE
NAME	IAMMATTEO, JACK	
STREET ADDRESS	2829 NE 30TH ST	
CITY-ST-ZIP	FT LAUDERDALE, FL 00000	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	DP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	VARTANIAN, JANICE E.	
13 STREET ADDRESS	2829 N.E. 30TH STREET	
14 CITY-ST-ZIP	FORT LAUDERDALE, FL. 33306	
21 TITLE	DV	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME	IAMMATTEO, JACK	
23 STREET ADDRESS	2829 N.E. 30TH STREET	
24 CITY-ST-ZIP	FORT LAUDERDALE, FL. 33306	
31 TITLE	DTS	<input type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME	GERTRUDE F. WALSH	
33 STREET ADDRESS	2829 N.E. 30TH STREET	
34 CITY-ST-ZIP	FORT LAUDERDALE, FL. 33306	
41 TITLE	ASD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
42 NAME	MARY BENSON	
43 STREET ADDRESS	2609 N.E. 26TH AVENUE	
44 CITY-ST-ZIP	FORT LAUDERDALE, FL. 33306	
51 TITLE	ATD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
52 NAME	TAUBEL, JEAN K.	
53 STREET ADDRESS	2829 N.E. 30TH STREET	
54 CITY-ST-ZIP	FORT LAUDERDALE, FL. 33306	
61 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Gertrude F. Walsh* **Gertrude F. Walsh** DATE: **Feb. 23, 1996** (954)563-9656

CR2E037 (12/95)