NONPROFIT **CORPORATION** ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 711315

1. Corporation Name

GEORGIAN COURT APARTMENTS, INC.

Principal Place of Business							
1901 NE 62ND STREET							
APT. 125							
FT. LAUDERDALE FL 33308							

Mailing Address 1801 NE 62ND STREET

APT. 125

FT. LAUDERDALE FL 33308

FILED Mar 22, 1999 8:00 am Secretary of State

03-22-1999 90103 036 ****61.25



2. Principal P	rincipal Place of Business 2a. Mailing Address				Date Incorporated or Qualifed			
21		26			08/08/1966			
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.		4. FEI Number	<u> </u>	olied For	
22		27			59-1172290		t Applicable	
City & Stat	8 ^ -	City & State	City & State		5. Certificate of Status Desired	\$8.75 Additional Fee Required		
Zip Country Zip			Country 6.		6. Election Campaign Financing	\$5.00	May Be	
24	25 29 30			Trust Fund Contribution Added to Fees			o Fees	
	9. Name and Address of Current	Registered Agent			10. Name and Address of New Registered	Agent		
			81	Name				
WEST, BARBARA F.				82 Street Address (P.O. Box Number is Not Acceptable)				
4530 NORTH FEDERAL HIGHWAY				Suber Auc	iless (1.0. box rumber is necrosepasie)	•		
FT. LAUDERDALE FL 33308								
רו. באטטו	ENDALE I E 35500			-		85 Zip C	- Codo	
	,		84	City	FL	_ 65 210 0	JOG O	
11. Pursuant	to the provisions of Sections 617 0502	and 617 1508. Florida Statutes	the abov	e-named cor	poration submits this statement for the purpose of	changing its	registered	
office or r					ion's board of directors. I hereby accept the appo	intment as reg	gistered	
agent. I a	m fg accept the obligati	ons of, Section 617.0503, Florid	ia Statutes	i.	<u> </u>	1.8 /	201	
SIGNATURE	Mileala	+ Wat	and the same of the same	at aireature requir	red when reinstating) DME	<u> </u>	,4_	
12.	Sface, typed or printed name of registered agent		13.	iir siğisamı a rad as	ADDITIONS/CHANGES TO OFFICERS AT	ND DIRECTO	RS IN 12	
	OFFICERS AND DIRECTORS ViDD DELETE		1.1 TITLE			Change	☐ Addition	
TITLE			1.2 NAME				_	
NAME	ROSCETTI, PAT							
STREET ADDRESS	•		1.3 STREET ADDRESS				•	
CITY-ST-ZIP	FT LAUDERDALE, FL 00000		1.4 CITY-ST-ZIP		•	Change	Addition	
TITLE	TD □ DELETE		2.1 TITLE			C change		
NAME	EDELFELT, IVAN		2.2 NAME			*		
STREET ADDRESS			2.3 STREE	TADORESS	·			
CITY-ST-ZIP	FT. LAUDERDALE FL		2. 4 CITY-	ST-ZIP			□ Addition	
TITLE .	PD DELETE 3		3.1 TITLE	1 -		☐ Change	☐ Addition	
NAME	· ·		3.2 NAME		•			
STREET ADDRESS	AFOR AL PEDEDAL LIKOLINAV			T ADDRESS	•			
CITY-ST-ZIP	FT. LAUDERDALE FL 3		3.4. CITY-	ST-ZIP				
TITLE	<u> </u>		4,1 TITLE			Change	☐ Addition	
NAME	BOWSER, FRANK		4. 2 NAME					
STREET ADDRESS			4.3 STREE	TADORESS				
CITY-ST-ZIP			4.4 CITY-5	ST-ZIP				
TITLE	^SD	☐ DELETE	5.1 TITLE			Change	☐ Addition	
NAME	WEST, BARBARA		5.2 NAME					
STREET ADDRESS			5.3 STREE	T ADDRESS				
CITY-ST-ZIP	FT LAUDERDALE, FL 00000		5.4 CITY-5	ST-ZEP	·			
TITLE	D					· Change	☐ Addition	
NAME	BOCHICCHIO, M.L.		6.2 NAME					
STREET ADDRESS			6.3 STREE	T ADDRESS				
SINCE I ADURESS	TIAUDEDDALE EL COCCO		64 CITY-S	į į	•			

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 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, with all other like empowered.

SIGNATURE: