

FILE NOW: FILING FEE IS \$61.25

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Apr 08 1997 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997



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

DOCUMENT # 712683 (2)  
1. Corporation Name  
GEORGIAN COURT APARTMENT NORTH, INC.



Principal Place of Business Mailing Address  
6260 N. E. 18TH AVENUE FORT LAUDERDALE FL 33334  
6263 NE 19 AVE. #1001 FT. LAUDERDALE FL 33308-1346

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified		3a. Date of Last Report	
21 6260 N. E. 18TH AVENUE FORT LAUDERDALE FL 33334		26 6263 NE 19 AVE. #1001 FT. LAUDERDALE FL 33308-1346		05/04/1967		08/19/1996	
22 Suite, Apt. #, etc.		27 Suite, Apt. #, etc.		4. FEI Number		Applied For	
23 City & State		28 City & State		59-1216082		Not Applicable	
24 Zip		29 Zip		5. Certificate of Status Desired		8.75 Additional Fee Required	
25 Country		30 Country		6. Election Campaign Financing Trust Fund Contribution		5.00 May Be Added to Fees	
26 33308		30 Broward		7. This corporation has liability for intangible tax under s. 199.032, Florida Statutes		Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	

9. Name and Address of Current Registered Agent  
BOCHIN, ZENIA  
6260 NE 18 AVE #722  
FT LAUDERDALE FL 33334

10. Name and Address of New Registered Agent  
81 Name Edward J. Ryan  
82 Street Address (P.O. Box Number is Not Acceptable) 6261 N. E. 19th Ave., #1203  
83  
84 City Ft. Lauderdale FL 85 Zip Code 33308

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 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 617.0503, Florida Statutes.  
SIGNATURE Edward J. Ryan Edward J. Ryan 2 APRIL 1997  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

TITLE	P/D	<input checked="" type="checkbox"/> DELETE
NAME	BOCHIN, ZENIA	
STREET ADDRESS	6260 N. E. 18TH AVENUE #722	
CITY-ST-ZIP	FORT LAUDERDALE FL 33334	
TITLE	V/D	<input type="checkbox"/> DELETE
NAME	RYAN, EDWARD	
STREET ADDRESS	6263 N. E. 18TH AVENUE #912	
CITY-ST-ZIP	FORT LAUDERDALE FL 33334	
TITLE	T/D	<input type="checkbox"/> DELETE
NAME	LUCIANO, CAROLE	
STREET ADDRESS	6263 N. E. 18TH AVENUE #923	
CITY-ST-ZIP	FORT LAUDERDALE FL 33334	
TITLE	S/D	<input checked="" type="checkbox"/> DELETE
NAME	BOWES, MARJORIE	
STREET ADDRESS	6260 N. E. 18TH AVENUE #822	
CITY-ST-ZIP	FORT LAUDERDALE FL 33334	
TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	SNEVEL, HOWARD F.	
STREET ADDRESS	6263 N. E. 18TH AVENUE #922	
CITY-ST-ZIP	FORT LAUDERDALE FL 33334	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	P/D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	Edward J. Ryan	
1.3 STREET ADDRESS	6261 N. E. 19th Ave., #1203	
1.4 CITY-ST-ZIP	Ft. Lauderdale, FL 33308	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.1 TITLE	V/D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	Joseph Gianelli	
2.3 STREET ADDRESS	6261 N. E. 19th Ave., #1203	
2.4 CITY-ST-ZIP	Ft. Lauderdale, FL 33308	
3.1 TITLE	T/D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	Carole Luciano	
3.3 STREET ADDRESS	6261 N. E. 19th Ave., #1203	
3.4 CITY-ST-ZIP	Ft. Lauderdale, FL 33308	
4.1 TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.2 NAME	Daniel Dixon	
4.3 STREET ADDRESS	6261 N. E. 19th Ave., #1203	
4.4 CITY-ST-ZIP	Ft. Lauderdale, FL 33308	
5.1 TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
5.2 NAME	Garetta Bailey	
5.3 STREET ADDRESS	6261 N. E. 19th Ave., #1203	
5.4 CITY-ST-ZIP	Ft. Lauderdale, FL 33308	
6.1 TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
6.2 NAME	Marie Meccia	
6.3 STREET ADDRESS	6261 N.E. 19th Ave., #1203	
6.4 CITY-ST-ZIP	Ft. Lauderdale, FL 33308	

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 199.03(1), Florida Statutes. 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.

CR2E037 (9/96)

GEORGIAN COURT APARTMENT NORTH, INC.

ADDITIONAL OFFICERS/DIRECTORS

D  
Richard Windebank  
6261 N. E. 19th Ave., #1203  
Ft. Lauderdale, FL 33308

S  
Neil Meccia  
6261 N. E. 19th Ave., #1203  
Ft. Lauderdale, FL 33308